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ABSTRACT

The Early Identification and Prevention Program (EIP) was designed to identify and meet special needs of children in kindergarten through third year with special emphasis on the second grade. The findings of the report are based on a city-wide survey of the personnel working in all the 18 elementary schools which had a full complement of EIP personnel assigned to them. The principals, teachers and special personnel whose assignment brought them in contact with children from kindergarten through fourth grade were invited to fill out questionnaires specially prepared for each group after conferences with representative group members. The questionnaires were designed to enable the personnel most concerned to rate the program's effectiveness in terms of its objectives. Among the findings are the following: Only 121 teachers or twenty percent of the total queried reported that the program was effective in the personal-social adjustment of the pupils with emotional problems. Guidance counselors rated poorly the program's ability to identify and develop the special abilities and talents of pupils. All personnel surveyed agreed that the program was effective in identifying children with incipient emotional problems but long-range therapeutic clinical service for individual children was seen to be in critical short supply and referral resources which would provide this were reported as deplorably few. (Author/AM)

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BOARD OF EDUCATION OF THE CITY OF NEW YORK
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QUESTIONNAIRE SURVEY OF THE EARLY IDENTIFICATION AND PREVENTION PROGRAM

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U.S. DEPARTMENT OF HEALTH,
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1. THE PROBLEM

A. BACKGROUND OF THE STUDY

The present study of the "EIP" (Early Identification and Prevention Program) is the second part of a triad. The series was begun in the fall of 1961 with a pilot study. The findings of the pilot study were that during the six month evaluation period, "EIP" and control groups showed no differences in reading and arithmetic achievement. The problem children in the "EIP" program, however, showed significant gains on all the adjustment variables considered. Principals and teachers exhibited positive attitudes toward the program and were unanimous in their approval.

In addition to the evaluative aspects of the study, this pilot project served as a laboratory for the try-out and refinement of measuring instruments. Such problems as the selection of the proper level achievement test (Primary I) were solved during this period.

On the basis of the results reported here, it was decided to proceed with a more formal evaluative study in additional schools which are new to the program.

General Aim of the Studies

This study of the "EIP" program is designed to determine whether the program is meeting the original objectives set for it by the Elementary School Division in cooperation with the Division of Child Welfare. A more specific aim is to evaluate the relationship between certain operational factors in the program and its rated success in meeting its objectives.

B. THE STUDY OF THE OVERALL FUNCTIONING OF THE EARLY IDENTIFICATION AND PREVENTION PROGRAM

Origin of the Study

The Early Identification and Prevention Program was started in 1959 under the combined auspices of Dr. John B. King, then Associate Superintendent in charge of the Division of Elementary Schools, and Dr. Morris Krugman, then Associate Superintendent in charge of the Division of Child Welfare.

The program objectives were stated as follows:[1]

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[1] Division of Elementary Schools, Handbook, Board of Education of the City of New York, 1962-1963, p.41.

"The program attempts to identify and meet special needs of children in grades kindergarten through third year with special emphasis on the second grade. Its aims are:

> 'To identify children's abilities, talents and problems early in their school life.
>
> 'To determine the incidence and nature of children's problems in the kindergarten through third year.
>
> 'To determine to what extent maladjustment is prevented through the creation of a sound mental hygiene educational climate in schools serviced by such teams.
>
> 'To identify individual school and community patterns which indicate probable success and/or failure for pupil adjustment.
>
> 'To refine techniques for the identification of abilities, talents and incipient maladjustment.
>
> 'To provide consultation assistance and adequate interpretation of children's behavior to the school staff and so create increased awareness of children's needs and how to meet them.
>
> 'To develop evaluative instruments for determining the effectiveness of this integrated approach.'"

To reach these objectives in selected schools, it was planned to assign teams which would consist of one full-time guidance counselor from the Bureau of Educational and Vocational Guidance, one half-time social worker and one half-time psychologist from the Bureau of Child Guidance with consultative help from a psychiatrist, working in cooperation with other school personnel. The schools were selected in cooperation with District Superintendents.

Some of the objectives of the program were of such a nature that only a longitudinal, depth study could ascertain the success with which they had been met. This was begun late in 1962 in a school new to the program in September, 1962. This research design would not be appropriate for schools where the "EIP" program had been in operation for a length of time prior to the study, as properly controlled data on the initial status of the schools were not available before the experimental factor took effect.

The longitudinal depth study was currently in process in one school from 1963 to 1965 and final data have now been collected.

In the great majority of schools the program has been functioning at least two or three years and it is possible to evaluate the results as seen by school and clinical personnel. It is the evaluation of the overall functioning of the "EIP" program which will be reported here.

C. THE PROBLEM AND ITS SUBPROBLEMS

To assess the effectiveness of the "EIP" program it was decided to seek the judgement of the principals, teachers, guidance counselors, social workers, psychologists and psychiatrists involved in it. The problems thus to be investigated are:

1. To determine the overall helpfulness of the program as rated by teachers and principals.
2. To assess the comparative success with which each of the specific objectives of the program have met as rated by principals and teachers.
3. To find those factors in the operation of the program which are most closely associated with positive ratings of the program as given by principals and teachers. Some of these factors are:
    - a. Length of experience of various personnel involved.
    - b. Regularity, ease and fruitfulness of contact between pedagogical and "EIP" personnel.
    - c. Attitudes of school personnel towards the program.
        1. The degree to which school personnel understand the "EIP" team member roles.
        2. The degree to which expectations of the team on the part of the school personnel are realistic.
        3. The degree to which there is acceptance of disturbed children on the part of school personnel.
    - d. Parental cooperation with school and "EIP" personnel.
        1. General pattern of cooperation.
        2. Ability of student's families to be self-maintaining.

3. Ease with which parents become involved in any indicated Bureau of Child Guidance treatment process.

e. Distribution of time of "EIP" personnel to various age groups and types of service in the school.

f. Existence of other service supplementary to the educational process in the school.

4. To ascertain from pedagogical and personnel assigned to the "EIP" program by the Bureau of Child Guidance and the Bureau of Educational and Vocational Guidance their recommendations as to the future of the program.

D. DESIGN OF THE STUDY

Selection of the Schools

Thirty-nine elementary schools are involved in the "EIP" program. To each of these, personnel who work in cooperating teams, are assigned by the Bureau of Educational and Vocational Guidance and the Bureau of Child Guidance. The nature of the program varies from school to school with population and geographical differences and with differing patterns of staff strengths. Schools which receive this extra service are selected in cooperation with the Assistant Superintendent in the district.

Of the thirty-nine schools in the program in 1963-64 only twenty had their full complement of prescribed professional services consisting of a full-time guidance counselor and the half-time services of a school psychologist and school social worker. It was decided to study only those schools which had the services of the full "EIP" team. However, two of the twenty selected "EIP" schools had junior guidance classes which provide for disturbed children. It was felt that it would be difficult for school personnel to assess the separate effect of these two programs. The elimination of these two schools left eighteen to include in the study.

Instruments

The Principal's Questionnaire. The principal, with his comprehensive knowledge of all the operations in his school, is in an excellent position to evaluate the contribution any single program makes to the total educational product within his purview.

Principals of the eighteen schools where there was a full "EIP" staff complement in 1963 and 1964 and where there were no junior guidance classes, were sent questionnaires.

It was decided to ask the principals involved in the "EIP" program to rate the effectiveness with which the program reached its goals in their schools and to make suggestions as to the program's future course. The research committee undertook the construction of a two-part instrument (see the appendix) which would elicit the reactions of the principals. To develop one part of the instrument the research team specified each stated objective of the "EIP" program in such a way that it could be rated on a scale of values from zero to five.

In the second part of the instrument, discovery of the program's operational strengths and to obtain suggestions from principals for its improvement, another section of the questionnaire was deemed necessary. To develop it, members of the research team interviewed three principals as to their experiences with the program. From these conferences came the basis on which the write-in questions were constructed. The instrument was tried out with two principals whose schools were not to be used in the survey. Minor changes were made as a result of the try-out.

The Teacher's Questionnaire. Who knows better than the classroom teacher what any given program in the school contributes to the effectiveness of her work? In order to obtain this specialized knowledge, it was decided to send a questionnaire to the teachers in the eighteen schools under survey.

A three-part questionnaire (see appendix for a copy) was developed by members of the research team. One part, which is similar to Part One of the Principal's questionnaire, was developed by specifying each stated objective of the "EIP" program in such a way that it could be rated on a scale of values from one to four. A fifth category, "not functioning as far as I am concerned" was also included.

To discover the relationships between the strengths of the program reported by teachers, and certain operational factors, the research team developed additional sections of the instrument. To accomplish this they interviewed teachers in two schools which had the program, and elicited descriptions of the program as experienced by the teachers directly involved in it.

Sections I, III, and IV of the questionnaire were constructed with the help of insights gained in these interviews. The instrument was then tried out in one school, and interviews were held with teachers who cooperated in trying out the instrument to determine possible ambiguities in the questionnaire and to estimate reliability.

The Guidance Counselor's Questionnaire. To develop one section of the Guidance Counselor's questionnaire the research team specified each stated objective of the "EIP" program in such a way that it could be rated on a scale of values from one through five.

To discover the operational factors in the program which might be related to the program's reported strengths, the research team developed additional sections of the instrument. To accomplish this they interviewed guidance counselors selected by a supervisor of the Bureau of Educational and Vocational Guidance who was assigned as Coordinator of the Early Identification Program. From these conferences came the basis on which questions were constructed which were to evaluate operational factors in the program. The instrument was tried out with two guidance counselors whose schools were not among those to be used in the survey. Minor changes were made as a result of the try-out. A copy of the Guidance Counselor's Questionnaire is appended.

The School Social Worker's and School Psychologist's Questionnaire. To develop one section of the school social worker's and psychologist's questionnaire, the research team specified each stated objective of the "EIP" program in such a way that it could be rated on a scale of values from one through five.

To discover the operational factors in the program which might be related to the program's reported strengths, the research team developed additional sections of the instrument. To accomplish this they interviewed psychologists and psychiatric social workers who were serving in various schools where the Early Identification and Prevention Program functioned. From these conferences were elicited the bases for the construction of the parts of the instrument which relate to operational strengths and problems. The instrument was tried out with two clinicians assigned to schools participating in the program which were not among those included in the survey. Minor changes were made as a result of the try-out.

The questionnaire for school social workers and school psychologists is appended.

The School Psychiatrist's Questionnaire and Evaluation. The school psychiatrist is very often a pivotal member of the clinic team. The other team members as a rule, participate more in the school situation while the psychiatrist remains more firmly based in the clinic. His opinion as to the effectiveness of the "EIP" as a way of dealing with clinical problems in children, therefore becomes important. A short questionnaire was developed for distribution to the 18 psychiatrists who serve the program. The questionnaire which is appended, was designed to elicit information in the following areas:

1. The psychiatrist's distribution of his time among various types of service.
2. The psychiatrist's patterns of working with the team and the school.
3. The effectiveness with which the school uses the psychiatrist's time on school visits.
4. The differences between the "EIP" program and the other Bureau of Child Guidance programs as seen by the psychiatrist in:
    a. the nature of the psychiatrist's service.
    b. the patterns of behavior in the children referred.
    c. the percentage of children who "act out".
    d. the psychiatrist's preference for working in the "EIP" or other programs.
5. The benefits intrinsic to the program as seen by the psychiatrist.
6. The psychiatrist's suggestions for improving the program.

The instrument was a brief one and it was decided to explore the psychiatrists' reactions to the program in greater depth. The Chief Psychiatrist of the Bureau of Child Guidance arranged to have Dr. Tieman and Dr. Lolis at a meeting at which the psychiatrists serving the "EIP" program were asked to be present for the purpose of discussing the program with the research team. The conference was recorded on tape.

THE FINDINGS

The Principals Who Participated

In the Spring of 1964, the Principal's Questionnaire was sent city-wide to principals in the eighteen schools which had a full "EIP" team and no junior guidance classes. Seventeen principals returned their questionnaires.

Characteristics of the Principals Who Replied

The principals who replied had an average of 11½ years of experience as principals. Only three of them had less than eight years' experience while five had seventeen or more years' experience. Only two had been in the same school the entire length of their careers as a principal. The group averaged 5½ years' experience as a principal in the same school. On the whole they were an experienced group of administrators who were in their present schools long enough to be familiar with the school and the "EIP" program as it functioned in their own area.

The Findings of the Principal's Questionnaire

In the development of the questionnaire, questions A through P were designed to elicit the principals' evaluations of the Early Identification and Prevention Program objectives as stated in the Elementary School Handbook.[1] The objectives chosen were as follows:

1. "To identify children's abilities, talents and problems early in their school life.
2. 'To determine to what extent maladjustment is prevented through the creation of a sound mental hygiene climate in schools serviced by such teams.
3. 'To refine techniques for the identification of abilities, talents and incipient maladjustment.
4. 'To provide consultation assistance and adequate interpretation of children's behavior to the school staff and so create increased awareness of children's needs and how to meet them."

The relative overall effectiveness with which the program objectives met in the eyes of the principals becomes of interest. The principals rated each item on a scale of

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[1] Division of Elementary Schools, Handbook 1962-63, Board of Education, City of New York, p. 40.

1 to 5 as follows:

5 - Very Helpful
4 - Helpful
3 - Limited Helpfulness
2 - Not Helpful
1 - Detrimental

The ratings for each item were averaged and the averages ranked. Table 1 presents the itemized objectives ranked in order of degree of helpfulness as observed in the principal's school.

Table 1

"EIP" Program Objectives Ranked as to Principals' Rating of Their Helpfulness as Realized in the Individual School

Rank	Averaged Ratings	Item
1.	1.71	Ability of teachers to spot early signs of behavioral difficulties
2.	1.75	Parental attitudes toward the school and its objectives
3.	1.76	Identification by the "EIP" team of children with incipient emotional problems
4.	1.81	Parental attitudes toward emotional problems of their children
5.	1.94	Teacher attitudes toward disturbed children
6.	2.00	Teacher attitudes toward children with learning problems
7.	2.06	Ability of teachers to meet pupil needs more effectively
8.	2.18	Identification by the "EIP" team of children with physical problems
9.	2.29	Parental attitudes toward learning problems of their children
10.	2.31	The mental hygiene educational climate in the school as influenced by the "EIP" team

Rank	Averaged Ratings	Item
11.	2.43	Identification by the "EIP" team of children with special abilities and talents
12.	2.47	Grouping pupils for classroom organization
13.	2.47	Personal-social adjustment of pupils with emotional problems
14.	2.53	Ability of teachers to identify children with special abilities and talents
15.	2.76	Personal-social adjustment of all other pupils in the school
16.	2.78	Provisions by the "EIP" team for the development of special abilities and talents of identified pupils

The principals felt the program was most helpful in helping teachers spot early signs of behavioral difficulties in children and in the actual identification of children with incipient emotional problems by the "EIP" team.

Also rated high in helpfulness were the effect on parental attitudes towards the school and its objectives and the effect on teacher and parent attitudes towards emotional problems of their children.

Of least helpfulness were the provisions by the "EIP" team for the identification and development of pupil abilities and talents.

The principals also rated as relatively ineffective the team's ability to improve the personal-social adjustment of the general population of pupils in the school and of those with emotional problems.

The principals did not as a whole feel they were helped in the matter of grouping pupils for classroom organization.

In rating the program overall, eight or nearly half the principals placed it in the "helpful" category. Four found it "very helpful" and five rated it of "limited helpfulness."

Only a few principals used the rating of "not functioning as far as I am concerned."

The items which had the "not observed" rating were the following:

Item	Number of Principals Using the "not observed" rating
Identification by the "EIP" team of children with special abilities and talents	3
Provisions by the "EIP" team for the development of special abilities and talents of identified pupils	3
The program's effect on the ability of teachers to identify children with special abilities and talents	3
Grouping pupils for classroom organization	2
Effect of the program on parental attitudes to the school and its objectives	1
Effect of the program on parental attitudes toward learning problems of their children	1

The principals used the "detrimental" rating (1) only twice. The two items thus rated are as follows:

> "The mental hygiene educational climate in the school as influenced by the "EIP" team.
> 'Personal-social adjustment of pupils with emotional problems."

As far as the other principals were concerned, the effect of the program on the mental hygiene educational climate in the school was ranked tenth (out of 16 items) in helpfulness and the program's effect on the personal-social adjustment of pupils with emotional problems was ranked thirteenth.

Principals were given an opportunity to offer several write-in statements in response to the following questions:

1 - In which specific ways has the Early Identification and Prevention Program served the needs of your school?
2 - In which specific ways has the program failed to carry out the needs of your school as you see them?
3 - As principal, indicate any changes you feel would improve the "EIP" program?

The types of service as mentioned by the principal as being of value in their school are listed below:

Service Provided	Frequency of Mention by the Principals
1. Gave teachers a better understanding of and help with children.	5
2. "EIP" team participation in faculty conferences	4
3. "EIP" team participation in parent meetings	4
4. Early abilities and talents of children were identified	3
5. Children tested and referred for special class placement	3
6. The mental hygiene climate in the school was improved	3
7. Children's problems were identified early	3
8. The team was present in the school	2
9. Interviews were held with parents	2
10. Individual children received attention	2
11. Parents received counseling	2
12. Teachers and supervisors were released from time-consuming liaison work and record-keeping	1
13. Parents were given a better understanding of children	1
14. Pupil data was interpreted to parents and teachers	1

Service Provided	Frequency of Mention by the Principals
15. The team worked with teachers, parents and children in formulating and carrying through appropriate plans	1
16. The "EIP" team members were scholarly	1
17. Guidance materials were secured	1
18. Grades were reorganized	1
19. New teachers were oriented	1
20. The "EIP" team met with supervisors	1
21. More attention was focused on the needs of early childhood pupils	1
22. Guidance counselor made home visits	1
23. Liaison was made between community agencies and parents	1
24. Recommendations were made for class placement for specific children	1
25. There was improved liaison between kindergarten and first grade teachers	1
26. The "EIP" team helped alleviate many problems	1
27. The "EIP" team participated in teacher training	1
28. Children were classified	1
29. The Guidance Counselor gathered information and administered to children with short range problems	1
30. The Guidance Counselor separated discipline cases with respect to organization of classes	1

As revealed by these data, although only 17 principals reported, at least 30 different functions of the "EIP" program were mentioned, suggesting that the program's strengths varied with the needs of each school and the competencies of the team members.

Principals complained that there was not enough service in the following areas:

Item		Frequency of Mention by Principals
1.	Upper grades not covered	7
2.	More services of a guidance counselor needed (i.e.,counselor should be assigned full time to "EIP" and another assigned to grades 4 through 6).	17
3.	More of the team's time is needed in actual hours at the school itself.	2
4.	More time is needed for conferences between teachers and "EIP" personnel.	1
5.	Psychologist and social worker should have as much time in the school as the guidance counselor, (the unequality of the time creates a burden for the counselor) and more cases could then be covered	7
6.	Remedial and therapeutic service after "identification" are woefully insufficient.	5

In addition to the above quantitative needs there were those which were more qualitative in nature. As reported by the principals these were:

1. The need for a clearer delineation of the responsibilities of the "EIP" staff towards the school, the children and each other
2. The need to discover problems before the child acts them out
3. The need to identify underachievers more promptly
4. The need to identify those children with talents and help them realize these
5. The need to cut down the amount of time spent on record keeping
6. The need for non-psychiatric "EIP" clinical personnel to accept their limitations in rendering "psychiatric" service so as not to harm children
7. The need to overcome the fact that too few children are actually served.

8. The need for more medical discharges
9. The need for the "EIP" team to be less remote from the life of the school
10. The need to revise the "clinical approach" so as to give consideration to the general situation in a grade and make recommendations for a larger number of people
11. The need for more social work follow-up
12. The need for the "EIP" team to coordinate its efforts with those of the school rather than to act as a separate entity.

One principal saw the "EIP" team's problems as a function of the mobility of the school's population which he felt mitigated against the effectiveness of the program. Other principals had individual questions about the program which they did not ascribe to general conditions. One stated that the team was interested in "identifying talent" but not in "problems". Another complained that the social worker did not get in touch with parents after experiencing that parents did not come to school when asked. A few saw the referral process as "passing on responsibilities to another agency." Several felt that not enough time was given to acting-out children. Two even complained that a few children were seemingly given license to behave as they pleased. In one way or another, principals complained about a lack of communication with the team. As one put it, "supervisors are kept in the dark about findings and treatment."

The principals had opinions about the agencies to which children were referred by the team, namely, that there were too few referral resources and that those few were too overcrowded to accomodate the school children referred after identification by the "EIP" team. The principals also reiterated the need for outside custodial care for disruptive pupils. One thought the services of a Spanish-speaking auxiliary teacher would be of great value in working with the children's families.

Overall Recommendations of Principals

Twelve of the 17 principals recommended an expansion of the program. Only two recommended continuing the program in its present form and three recommended its complete discontinuance even though it would mean a loss of service and personnel in their schools.

To the question, "If the program were discontinued, what alternative would you suggest?", nine of the seventeen principals made several suggestions. The specific suggestions were as follows:

Six wanted additional full-time guidance counselors in place of the "EIP" program. Two wanted an additional assistant principal instead and one wanted a "Dean for discipline."

Others wanted provision for seriously disturbed children. One asked for "more suspensions," two for Junior Guidance classes, and another wished the "removal of disturbed disruptive pupils from regular classrooms."

Two principals wanted smaller over-all class registers as a solution to their problems if "EIP" were discontinued.

Some wanted mental hygiene services in a form other than that provided by "EIP": one wanted an increase in purely psychiatric services, and another would prefer to have a combination of a full time guidance counselor and social worker. One wanted the Bureau of Child Guidance psychologists and social workers to have more extensive training in a mental hygiene clinic. Perhaps out of sheer frustration, another asked for "legislation governing parental agreement" to needed services.

The Teachers Who Participated

In the Spring of 1964, the Teacher's Questionnaire was sent city-wide to teachers in the eighteen schools which had a full "EIP" team and no junior guidance classes. Included in the group selected were all those teaching kindergarten, first, second, third and fourth grades. The fourth grade teachers were included even though the "EIP" teams were supposed to accept referrals below the fourth grade level. The program had been functioning for several years in all but three of the eighteen schools and fourth grade teachers were in a position to observe children who had been in classes where the program was operative.

Questionnaires were also sent to other specialized personnel in the eighteen schools. Included were corrective reading teachers, reading improvement teachers, teachers of classes for children with retarded mental development and the school nurse. It was felt that such personnel frequently came in contact with children served by the "EIP" team and often with the team itself. This would put them in a position to evaluate the program's effectiveness in many areas. The questionnaires were sent in individual envelopes to each respondent. Each packet included the questionnaire and a stamped envelope addressed to the research team. The respondent was assured that anonymity would be protected.

The total number of questionnaires sent was 597. Those returned numbered 273, or forty-seven per cent. Usable returns numbered 264. The program, by definition, was to concentrate its efforts at the second and third grade levels. Accordingly, an analysis was made of replies by grade level. Only 237 respondents indicated their school assignments. Forty-four per cent of the second and third grade teachers who were queried indicated their assignments in their returns. Therefore, we are certain that at least that per cent of them replied. Thirty-seven per cent of the teachers in kindergarten, first and fourth grades and thirty-eight per cent of the specialized personnel could be so counted.

All the findings based on analysis of the teacher questionnaires must be regarded in the light of the paucity of the return. The statements available come from forty-seven per cent of the teachers involved in the program and cannot be interpreted except with this limitation in mind. There is no way of knowing either the reasons why fifty-three per cent of the school personnel involved did not reply or what they would have said if they did reply.

Characteristics of the Teachers Who Replied

The teachers who replied were on the whole an experienced group. Seventy per cent were teaching four or more years. Nearly half have been teaching eight or more years. The analysis of teacher experience is given in Table 2.

Table 2

Length of Experience of Teachers in Eighteen Schools Who Responded to a Teacher Questionnaire

Years of Experience	Number of Teachers	Per cent of Teachers
less than 1	23	9%
1-3	55	21%
4-7	62	23%
8-19	73	28%
20 plus	51	19%
Total	264	100%

An analysis of the number of years experience in the same school reveals a different pattern. A relatively high per cent had been in the same school three years or less and only twenty-nine per cent had been in the same school eight or more years. The figures are given in Table 3.

Table 3

Length of Experience in the Same School of Teachers in Eighteen Schools Who Responded to a Teacher Questionnaire

Years of Experience in the same school	Number of Teachers	Per cent of Teachers
less than 1 year	37	14%
1-3 years	89	34%
4-7 years	62	23%
8-9 years	56	21%
20 or more years	20	8%

The Findings of the Teacher Questionnaire

In the development of the questionnaire, questions 10 through 30 were designed to elicit the teachers' evaluation of some of the Early Identification and Prevention Program objectives as stated in the Elementary School Handbook.[1] The objectives chosen were as follows:

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[1] Division of Elementary Schools, Handbook 1962-1963, Board of Education, City of New York

'To identify children's abilities, talents and problems early in their school life.

'To determine to what extent maladjustment is prevented through the creation of a sound mental hygiene educational climate in schools serviced by such teams.

'To refine techniques for the identification of abilities, talents and incipient maladjustment.

'To provide consultation assistance and adequate interpretation of children's behavior to the school staff and so create increased awareness of children's needs and how to meet them.'

The relative overall effectiveness with which the various program objectives have been realized becomes of interest. This ranking was determined by a percentage method. The population responding to each item of the questionnaire was 264. The 264 replies were distributed among the following six categories: "no response," "very helpful," "helpful," "not helpful," "detrimental," and "not functioning as far as I am concerned."

The total number of responses is 5,544. This represents the number of teachers (264) multiplied by the number of items (21). Only 35 times out of the 5,544 did the teachers fail to check one of the response categories. Five per cent (283) of the responses were in the "very helpful" category and 33.5 per cent (1,853) used the "helpful" category, making a total percentage of positive statements 38.5. The "not helpful" category accounted for 1,316 of the responses and the "detrimental" category accounted for 58 responses. Together they constitute a per cent of 24.8. The responses in the "not functioning as far as I am concerned" category numbered 1,999 and percentage wise this category accounts for 36.1 per cent. The distribution of responses is shown in Table 4.

Table 4

Distribution of Responses to Items 10-30 of Teacher's Questionnaire

	No Response	"very helpful and "helpful"	"not helpful and "detrimental"	"not functioning"	Total
Number of Responses	35	2,136	1,374	1,999	5,544
Per cent of total Responses	.6%	38.5%	24.8%	36.1%	100%

In the next analysis percentages were calculated for each of the 21 items in the "very helpful" and "helpful" categories and added together. The 21 items were ranked by sums of the percentages in the two "helpful" categories. The results are given in Table 5. As can be seen from Table 5, the items are arranged in order of their effectiveness as reported by the teachers.

Ranked first in helpfulness was the program's effect on teacher attitude toward disturbed children. The objectives which ranked 2,3 and 4 cover the major areas of the program. These are parental attitudes towards disturbed children, the program's ability to actually identify disturbed children and teachers' understanding of disturbed children. The four objectives which are rated just under the top four in effectiveness, are still in these major areas as indicated in table 5. Reference to the same table will reveal that the objectives which ranked below eight were positively rated by fewer than fifty per cent of the teachers who responded.

The 121 teachers who reported that the program was effective in the personal-social adjustment of pupils with emotional problems represent but forty-five per cent of those responding. Thus, while fifty-seven per cent of the teachers responding found the program helpful in identifying children with incipient emotional problems, much fewer found it helpful in its effect on the personal-social adjustment of these children.

Forty-eight per cent of the first grade teachers who replied to the item dealing with the effect of the program on the personal-social adjustment of pupils with emotional problems, found the program helpful in this area. Fifty

Table 5

Relative Effectiveness of Program Objectives as Rated by Teachers

Item	Rank	Response Category* Number of Teachers 0	1	2	3	4	5	% in category 1 & 2
1. What has been the effect on the EIP program on teacher attitudes toward disturbed children?	1	1	22	139	53	12	37	61
2. What has been the effect of the EIP program on parental attitudes toward the emotional problems of their children?	2	5	16	137	41	7	58	58
3. How valuable was the EIP program in the identification of children with incipient emotional problems?	3	0	25	126	64	0	49	57
4. How useful has the EIP team been in helping you to improve your understanding of the emotional problems of your pupils?	4	0	22	127	64	1	50	56
5. What has been the effect of the EIP program on parental attitudes toward learning problems of their children?	5	5	9	138	44	1	67	55
6. What has been the effect of the EIP program on parental attitudes toward the school and its objectives?	6	2	13	129	42	5	73	54
7. What has been the effect of the EIP program on teacher attitudes toward children with learning problems?	7	0	19	122	60	2	61	53
8. How valuable has the EIP team been to you in dealing with children in your class with emotional problems?	8	1	21	107	78	4	53	50
9. What has been the effect of the EIP program on the ability of teachers to spot early signs of behavioral difficulties?	9	3	24	102	60	0	75	48

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* Response Category: 0 = no response, 1 = very helpful, 2 = helpful
3 = not helpful, 4 = detrimental, 5 = not functioning as far as I am concerned.

Table 5 (cont)

Relative Effectiveness of Program Objectives as Rated by Teachers

		Response Category*						
		Number of Teachers						% in category
Item	Rank	0	1	2	3	4	5	1 & 2
10. What has been the effect of the EIP program on the personal-social adjustment of pupils with emotional problems?	10	0	9	112	82	2	59	45
11. How valuable has been the EIP program in influencing the mental hygiene educational climate?	11	3	18	97	69	7	70	44
12. What has been the effect of the EIP program on the ability of teachers to meet pupils' needs?	12	1	6	102	88	2	65	41
13. How valuable has been the EIP program in the identification of children with physical problems?	13	2	20	81	43	0	118	39
15. What has been the effect of the EIP program on the personal-social adjustment of the other pupils in the class?	15	2	5	55	81	7	114	23
15. Of what assistance has the EIP program been in grouping pupils for classroom organization?	15	1	5	56	51	5	146	23
15. Of what value has the EIP program been to you in working with children with learning problems?	15	1	11	51	85	0	116	23
17. How valuable was the EIP program in the identification of children with special abilities and talents?	17	2	12	40	39	1	170	20
18. How valuable has been the EIP program in developing the special abilities and talents of identified pupils?	18	1	5	39	64	1	154	17

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* Response Category: 0 = no response, 1 = very helpful, 2 = helpful
3 = not helpful, 4 = detrimental, 5 = not functioning as far as I am concerned.

Table 5 (cont)

Relative Effectiveness of Program Objectives
as Rated by Teachers

			Response Category* Number of Teachers						% in category
Item		Rank	0	1	2	3	4	5	1 & 2
19.5	What has been the effect of the EIP program on the ability of teachers to identify children with special abilities and talents?	19.5	2	6	33	78	0	145	15
19.5	How valuable has the EIP team been in increasing your awareness of the presence of special abilities and talents in your pupils?	19.5	2	9	32	63	1	157	15
21.	How valuable has the EIP team been to you in developing the special abilities and talents of your children	21	1	6	28	67	0	162	13
	Totals	5,544	35	283	1853	1316	58	1999	

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* Response Category: 0 = no response, 1 = very helpful, 2 = helpful,
3 = not helpful, 4 = detrimental, 5 = not functioning as far as I am concerned.

per cent of the second grade teachers, forty-eight per cent of the third grade teachers and fifty-three per cent of the specialized personnel who replied, found the program helpful in effecting personal-social adjustment of pupils with emotional problems while twenty-seven per cent of the fourth grade teachers who replied to this item, found the program helpful in this area. This suggests that the team's work with individual children was viewed more favorably by those teachers who were assigned to the grades covered by "EIP" than by those assigned to the fourth grade.

There was a correlation of .69 significant at the :05 level between teacher ratings of the helpfulness of the program as a whole and teacher ratings of the helpfulness of the program in effecting personal-social adjustment of pupils with emotional problems. This suggests that teachers who saw individual disturbed children helped viewed the program favorably.

Only twenty-three per cent of the teachers responding reported the program of value in working with children with learning problems. Fewest of all found the program of help in identifying and developing the special abilities and talents of pupils.

The Teachers' Overall Evaluation of the Program

In spite of these negative comments, 174 or sixty-six per cent of the teachers who replied, wanted the program expanded. Forty-six teachers, or seventeen per cent wanted it modified. Twelve teachers did not reply to this item. Only sixteen or six per cent wanted it continued as is and only fourteen or five per cent wanted it discontinued.

The Teachers' View of the Program's Functioning

Most of the teacher's direct experiences with the "EIP" program are in the form of conferences with the "EIP" staff.

Fifty-two per cent of the 264 teachers who replied to the questionnaire said they had one to five contacts with the "EIP" personnel during the year. Twenty-one per cent reported six to ten contacts. Fifteen per cent reported over ten contacts and twelve per cent said they had no contact at all during the year.

Twenty-three per cent said their conferences were unscheduled but easy to arrange while another twenty-three per cent said they were unscheduled and hard to arrange because of time pressure for either the teacher or the "EIP" staff. Seventeen per cent reported scheduled appointments supplemented by unscheduled ones, and fourteen per cent said their appointments were usually scheduled. Five per cent did not respond to this item and nine per cent found conferences hard to arrange for reasons other than time pressures.

Teachers were queried as to the usefulness to them of various kinds of conferences. The questionnaire carried a reminder to teachers that the names of the social worker, psychologist and guidance counselor who are on the "EIP" team may be found on the school organization sheet.

Grade conferences were not found to be very popular. Fifty-four per cent of the 264 teachers who responded to the questionnaire reported that they never had a grade conference. Twenty-four per cent rated these conferences in the helpful categories while nineteen per cent rated them in the not helpful categories. Two per cent did not respond to this item.

Conferences with the guidance counselor were prevalent. Only nineteen per cent of the teachers responding reported that they never had any and sixty-nine per cent rated them in the helpful categories while there were twenty-one per cent who rated them in the not helpful categories.

Teachers reported relatively less contact with the psychologist, social worker and psychiatrist.

Only 147 teachers said they had conferences with a psychologist. Of these, eighty-nine or thirty-four per cent of all the teachers reporting, rated the conferences in the "helpful" categories. 112 teachers or forty-two per cent of those replying, said they had no contact with a psychologist. Fifty-eight or twenty-two per cent of the teachers replying rated conferences with the psychologist in the "not helpful" categories. Two per cent did not respond.

127 teachers report having conferences with a social worker. Eighty-six or thirty-two per cent of all the teachers reporting rated the conferences in the "helpful" categories. Forty-one or sixteen per cent rated the con-

ferences in the "not helpful" categories and 133 or fifty per cent report "no contact" with a social worker. Two per cent did not respond.

There were very few conferences between teachers and psychiatrists. 213 teachers or eighty-one per cent of those replying, said they had no contact with a psychiatrist. Forty-two teachers or fifteen per cent report contact with a psychiatrist; twenty-five teachers or nine per cent placed these conferences in the "helpful" categories. Seventeen teachers or six per cent placed the conferences with psychiatrists in the "not helpful" categories. Nine or three per cent did not reply to this item of the questionnaire. Traditionally, psychiatrists in the Bureau of Child Guidance have devoted themselves to diagnosis and treatment of children and have not spent much time visiting schools. Thus, they lack enough experience in working with teachers to be able to communicate as meaningfully as they might if their orientation had emphasized the school situation.

Very few teachers report that they have had conferences with the whole clinic team at once; 184 or seventy per cent report no such experience. Thirty-six or thirteen per cent found conferences of this type "helpful" and thirty-seven or fourteen per cent rated these conferences in the "not helpful" categories. Seven,or three per cent of the teachers who replied, did not respond to this item.

In a conference where the whole clinic team is present, the talk can become so "shop" oriented and full of technical terms that perhaps the teacher cannot benefit as much as she could in a conference with one member of the team who can utilize the teacher's participation and interpret the clinical findings in terms which enable the educator to put them into practice.

There is a service which only a properly trained clinic team can offer in a school setting. It is one of the chief reasons for putting such a team in such a setting. It consists of weekly individual psychotherapy with a child combined with frequent, interpretive conferences with the child's parent and teacher.

Thirty-one, or twelve per cent of the teachers said that when they have had this experience they found that the child improves. Seventy-seven, or twenty-nine per cent said they did not see improvement in class, but thought the child might be better in other ways. Thirty-seven teachers, or fourteen per cent said that they didn't know if the child was better but the teachers felt more able to tolerate the child in the classroom. One hundred eleven teachers, or forty-two per cent said they never had this experience and five teachers did not reply to this item.

In spite of increased personnel assigned to the schools because of the "EIP" program, individual clinical service is still in short supply as far as the teachers are concerned.

One hundred sixteen or forty-four per cent of the teachers who replied reported that in the matter of receiving help with learning problems, the program was not functioning as far as they were concerned.

Teacher's Attitudes Towards Conferences and Contacts With the Team

1. The usefulness of "EIP" grade conference and the number of years of teaching experience.

Twenty-three teachers replied that they had been teaching less than a year. Of these, ten reported they had participated in at least one grade conference and four found it helpful. These findings suggest that a teacher needs to get oriented to her job and to the school before there can be awareness and constructive use of special services.

Twenty-two teachers who said they had "EIP" grade conferences reported that they had been teaching from one to three years. Of these, sixty-eight per cent found "EIP" grade conferences helpful. This suggests that at this stage of experience, teachers are able to profit from insights gained in sharing with others who teach the same age group, and with experts in child guidance, the daily classroom mental hygiene problems.

Only forty-eight per cent of the twenty-nine teachers with four to seven years' experience and only fifty-three per cent of the thirty teachers with eight to nineteen years' experience who said they had "EIP" grade conferences found "EIP" grade conferences helpful. Of the twenty-four "EIP" teachers with over twenty years' experience who attended

"EIP" conferences, sixty-two per cent found them helpful. One could speculate that perhaps there is a veteran's satisfaction in conferring with younger teachers, or perhaps it suggests that the very experienced teacher can relax enough to profit from conferences with a guidance staff. The findings suggest that "EIP" grade conferences as presently constituted are most fruitful with teachers who have had from one to three years' experience.

2. The Ease With Which Conferences Are Arranged and Teacher Attitudes as to the Helpfulness of the Program.

The ease with which conferences are arranged is highly related to global teacher attitudes as to the helpfulness of the program.

The responses in the "helpful" and "very helpful" categories on items 10-30 in the teacher questionnaire, numbered 2,151. Of these, 586 were given by teachers who said that conferences with the "EIP" team were scheduled and supplemented by unscheduled ones. Five hundred thirty three of the responses were given by teachers who said that conferences with the "EIP" team were unscheduled but easy to arrange. These accounted for 54.3 per cent of the replies in the helpful categories. Only 12.1 per cent of the replies in the "helpful" categories were accounted for by teachers who said that conferences with the "EIP" team were usually unscheduled with a few scheduled or that conferences were unscheduled and hard to arrange for reasons other than time pressure. There was a forty-two per cent difference in the amount of replies in the"helpful"category between the two types of interview situation. The difference is significant at less than the one per cent level. This finding suggests that when teachers can arrange conferences easily with the "EIP" team, they find the program more helpful than when conferences are difficult to arrange.

3. Number of Contacts with the "EIP" Team and Teacher Attitudes.

Those teachers who said they had from one to five contacts with the "EIP" team gave more replies in the "helpful" categories as far as the functioning of the program in meeting its objectives goes, than teachers who report having had any other number of contacts with the team. Of the total of 2,151 replies in the "helpful" categories, 993 of them are accounted for by teachers who said they had one to five contacts with a team member. The difference between 993 and the frequencies of responses in the"helpful" categories for each of the other contact number varieties is significant at the .10 level.

Next in amount of responses in the "helpful" categories is the group who said they had six to ten contacts with the "EIP" team. They account for 521 of the replies in the "helpful" categories. They differ from those who said they had no contact with the team personnel by 357 as there were 164 responses in the "helpful" categories given by teachers who said they'd had no contacts with the team. The difference of 357 is significant at less than the one per cent level. Those who said they had over ten contacts with "EIP" personnel seemed to contribute fewest of the positive appraisals of the helpfulness of the program given by the teachers who said they had at least one contact. Of the 2,151 responses in the "helpful" categories those teachers who report having over ten contacts with "EIP" personnel accounted for only 452. However, the difference of 288 in number of responses between them and those teachers who report no contacts, is significant at less than the one per cent level.

Those teachers who report no contacts with the clinic team contributed fewest of the responses in the "helpful" categories. Most of the responses in the "helpful" categories were contributed by teachers who said they had one to five contacts with the "EIP" team. It could appear that one to five contacts is the optimum number of contacts. However, in view of the finding that ease with which conferences can be arranged is so highly related to the tendency of teachers to rate the program as helpful, it may merely mean that the number of contacts with "EIP" personnel per se is not as important as the teacher's feeling as to the ease with which a conference can be arranged.

4. The Teacher's Assignment, the Number of Contacts with "EIP" Personnel and the Helpfulness of the Program as Rated by the Teacher.

More teachers in the second and third grades report having six or more contacts with "EIP" personnel in 1963-1964 than do teachers in other assignments. The percentage of teachers reporting six or more contacts at each grade level is presented in Table 6.

Table 6

The Teacher's Grade Assignment and Number of Contacts the Teacher Had With "EIP" Personnel in 1963-64

Per Cent of Teachers at Each Grade Level Reporting Six or More Contacts with "EIP" Personnel During 1963-64					
Kgn.	Grade 1	Grade 2	Grade 3	Grade 4	Special Assignment
36%	36%	42%	40%	20%	36%

It is to be expected that this would be so since the program attempts to identify and meet special needs of children in grades kindergarten through third year with special emphasis on the second grade. The data in Table 6 indicate that more contacts are had by "EIP" personnel with teachers of grades where the program is emphasized than with teachers of the other grades.

Furthermore, in separate analysis, there appears to be a relationship between grade level or assignment of the teacher and her ratings as to the helpfulness of the program. The teachers who report that they teach at the second grade level account for more responses in the"helpful"category in rating the program's objectives than do the teachers with other assignments. Four hundred twenty four or twenty per cent of the 2,151 responses in the helpful categories were given by second grade teachers. Kindergarten teachers accounted for fewest of the responses in the"helpful"categories, giving only 207, or nine per cent. Fourth grade teachers accounted for only 257, or eleven per cent of the responses in the"helpful"categories. The difference in percents between second and fourth grade teachers is nine and it is significant at less than the one per cent level.

Third grade teachers and teachers in special assignments such as CRMD, Corrective Reading, Reading Improvement, and in OTP positions, gave eighteen per cent of all the responses in the "helpful" categories or nearly as many as the second grade teachers. First grade teachers were very close in rating the program's objectives as "helpful", giving 369 or seventeen per cent of all the responses in the "helpful" categories.

Thus, we see a positive interrelationship between the teacher's tendency to rate the effects of the program as "helpful", the number of contacts she has with "EIP" personnel and the teacher's classroom assignment. The program was set up to concentrate its efforts in the second grade. Second grade teachers have significantly more contacts than others with the program and tend to rate it as helpful to a greater extent than do other teachers.

Teacher's Attitudes Towards Parental Cooperation and Teacher's Rating as to the Program's Helpfulness

What of general parental cooperation in the school, and teachers' ratings as to the program's overall helpfulness and its ability to affect parental attitudes towards the emotional problems of their children?

Teachers who find parents in general in their schools to be cooperative also find the program helpful in all its aspects. Forty per cent of the 2,151 responses in the "helpful" categories were given by teachers who said that parents generally keep appointments and are helpful.

The is a difference of fifteen per cent significant at the one per cent level between this group of responses in the "helpful" category (forty per cent) and the twenty-five per cent given by teachers who said that most parents do not keep appointments but that those who do, tend to cooperate. See Table 7.

Table 7

Parental Cooperation With the School and Teachers' Ratings as to the Helpfulness of the "EIP" Program

Number of Responses in the "Helpful" Categories	Per Cent of the 2151 responses in the "Helpful" categories	Parental cooperation with the school
865	40%	Parents generally keep appointments and are helpful
542	25%	Most parents do not keep appointments but those who do, cooperate

Number of Responses in the "Helpful" Categories	Per Cent of the 2151 Responses in the "Helpful" Categories	Parental Cooperation with the School
286	13%	Parents generally keep appointments but do not cooperate
245	11%	Parents generally do not keep appointments
53	2%	Parents generally don't keep appointments but do cooperate
160	9%	Item on parental cooperation left blank by responding teacher
TOTALS 2151	100%	

The fewest of all responses in the "helpful" categories were given by teachers who viewed parents as cooperative even though they do not keep appointments. It is essential in psychiatric casework with children to interview parents. Therefore, where parents tend not to keep appointments, the program can hardly be viewed as effective by teachers.

There is a highly significant relationship between parental cooperation as seen by teachers and their ratings as to effectiveness of the "EIP" program in improving parental attitudes towards the emotional problems of their children. A chi square of 36.868 was significant at less than the .01 level in testing this relationship.

Therefore, the program is seen to be most successful in improving parents' attitudes towards the emotional problems of their children when it is placed in a school where parents are disposed to be cooperative in the first place.

The Guidance Counselors Who Participated

In the Spring of 1964 the questionnaire was sent city-wide to Guidance Counselors assigned to the "EIP" program in the eighteen elementary schools which had a full "EIP" team and no junior guidance classes. All eighteen returned their questionnaires.

Characteristics of the Guidance Counselors Who Replied

The guidance counselors fall roughly into two groups in length of experience in their profession. Ten or more than half of the eighteen had four or fewer years--with three of them having less than a year's experience, while seven guidance counselors had exactly five years' experience. None had more than five years' experience although three had been assigned as teachers in the same school for a long time; one of them for twenty-five years.

On the whole, the group is, in comparison to the principals, teachers and clinicians included in this survey, one which is relatively inexperienced in its profession.

The Findings of the Guidance Counselors' Questionnaire

In the development of the questionnaire, questions 25-41 were designed to elicit the guidance counselors' evaluation of the Early Identification and Prevention Program objectives as stated in the Elementary School Handbook.[1] The objectives chosen were as follows:

> "To identify children's abilities, talents and problems early in their school life
> 'To determine to what extent maladjustment is prevented through the creation of a sound mental hygiene climate in schools serviced by such teams
> 'To refine techniques for the identification of abilities, talents and incipient maladjustment
> 'To provide consultation assistance and adequate interpretation of children's behavior to the school staff and so create increased awareness of children's needs and how to meet them."

The relative overall effectiveness with which the program objectives met in the eyes of the guidance counselors becomes of interest.

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[1] Divisions of Elementary Schools, Handbook 1962-63, Board of Education, City of New York, p.40.

Questions 25-41 were rated by the guidance counselors on a scale of 1-5 as follows:

1. Very helpful
2. Helpful
3. Not Helpful
4. Detrimental
5. Not functioning as far as I am concerned

The ratings for each item were averaged and the averages ranked. Table 8 presents the itemized objectives ranked as to their helpfulness as realized in the schools to which the guidance counselors were assigned.

Table 8

"EIP" Program Objectives Ranked as to Guidance Counselors' Rating of Their Helpfulness as Realized in the Individual School

Rank	Item
1.	How valuable was the "EIP" program in the identification of children with incipient emotional problems?
2.	What has been the effect of the "EIP" program on the ability of teachers to spot early signs of behavioral difficulties?
3.	Of what assistance has the "EIP" program been in grouping pupils for classroom organization?
4.	What has been the effect of the "EIP" program on parental attitudes toward the school and its objectives?
5.	How valuable was "EIP" program in increasing teacher willingness to maintain a difficult child in her class?
6.	How valuable has been the "EIP" program in the identification of children with physical problems?
7.	What has been the effect of the "EIP" program on parental attitudes toward the emotional problems of their children?
8.	What has been the effect of the "EIP" program on teacher attitudes toward disturbed children?
9.	What has been the effect of the "EIP" program on the personal-social adjustment of pupils with emotional problems?
10.	What has been the effect of the "EIP" program on parental attitudes toward learning problems of their children?
11.	What has been the effect of the "EIP" program on the ability of teachers to meet pupils' needs?

EIP Program Objectives (cont.)

Rank	Item
12.	What has been the effect of the EIP program on teacher attitudes toward children with learning problems?
13.	How valuable was the EIP program in the identification of children with special abilities and talents?
14.	How valuable has been the EIP program in influencing the mental hygiene educational climate in the school?
15.	What has been the effect of the EIP program on the personal-social adjustment of the other pupils in the class?
16.	What has been the effect of the EIP program on the ability of teachers to identify children with special abilities and talents?
17.	How valuable has been the EIP program in developing the special abilities and talents of identified pupils?

As the guidance counselors saw it, the program was most successful in identifying children with emotional problems and in increasing the ability of teachers to spot early signs of behavioral difficulties. Also successful in the eyes of the guidance counselors were the assistance given by the program in grouping pupils for classroom organization and in improving parental attitudes towards the school and its objectives.

Rated least in helpfulness were the program objectives of identifying and developing the special abilities and talents of pupils. Other objectives rated with a minimum degree of helpfulness were the effect on the personal-social adjustment of the non-identified pupils in kindergarten through third grade and the value of the program in influencing the mental hygiene climate in the school.

The guidance counselors were highly positive in their overall ratings of the "EIP" program. Eighty-nine per cent of all the responses on questions 25-41 were in the helpful or very helpful categories. No item received the "detrimental" rating.

The Functioning of the "EIP" Program As Seen by the Guidance Counselors

Distribution of the Guidance Counselors' Time

Over the total school year 1963-1964, the eighteen responding guidance counselors averaged 75% of their time in working with children in the "EIP" grades: kindergarten through third grade. Of the 25% of the time allotted to grades four to six, one third of it was spent in following up children with whom they had worked prior to fourth grade admission. The pattern of time distribution was similar in 1962-1963.

The counselors report that they spend more time (18.9%) in therapeutic interviewing of children than in any other activity. Fourteen per cent of their time is spent in interviewing parents diagnostically and 13.8% in interviewing children diagnostically. Less time is spent in conferences with teachers and nurses (10.2%) and with the Bureau of Child Guidance personnel (9.1%). The preparation of records and/or reports accounts for 8.1% of the collective time of the guidance counselors. The rest of their time is rather evenly divided among the following activities:

Observing children	6.8%
Studying records	5.7%
Conferences with principal	5.6%
Contacting other agencies	5.1%
Other activities	4.7%

Communicative Experiences of Guidance Counselors With Bureau of Child Guidance Personnel

Two thirds of the counselors reported that these conferences were in the nature of scheduled appointments supplemented by unscheduled ones. No guidance counselor reported difficulty in arranging conferences. Seventeen of the eighteen counselors reported that communication with the school social worker was "close and mutual"; the other counselor characterized it as "adequate."

Sixteen guidance counselors found conferences with the social worker "very helpful" and two found them "helpful."

Thirteen reported that communication with the school psychologist was "close and mutual," three found it adequate and two found it inadequate. Thirteen guidance counselors found conferences with the psychologist "very helpful"; three found them "helpful" and one characterized them as "not helpful" while another reported that they were "annoying."

Seven said their only communication with the school psychiatrist was through the social worker and psychologist. Five had the experience of being present at one or more case conferences held at the Bureau of Child Guidance and three said that they were able to meet regularly with the psychiatrist as a team member because of his weekly visits to the school. Seven guidance counselors found conferences with the psychiatrist "very helpful"; four found them "helpful" while five said they never had any contact with the psychiatrist. Two guidance counselors characterized communication with the psychiatrist as "adequate" and one did not reply to the question.

Overlapping of Function by "EIP" Team Members as Seen By the Guidance Counselors.

Of the seventeen guidance counselors, five reported overlapping of their functions with those of BCG personnel, eleven said there was no overlap and two did not respond. Three of the counselors found that the overlap was in the area of interviewing parents and one who found overlap in the area of screening children for further clinical service wished that her team mates would accord her more acceptance in the role of intake, apparently failing to appreciate the case worker's view of intake as part of the whole teatment process. Two of the counselors who reported overlap in interviewing stated that they did not want this overlap changed and one explained that, "A certain amount of overlap is important to team functioning and understanding."

Communicative Experiences With Teachers

Twelve counselors said their conferences with teachers were scheduled appointments supplemented by unscheduled ones and the others said these conferences were usually scheduled. The pattern had not changed substantially from the previous year. Eight guidance counselors reported that grade conferences held with teachers were "very helpful"; seven found them "helpful" and one regarded them as "not helpful" while two never had participated in a grade conference.

Ten guidance counselors thought the teachers in their respective schools tended to regard them as members of their discipline. Five thought they were regarded as a member of the psychiatric team and two thought they were regarded as members of the school administration. No guidance counselor thought she was regarded as "another teacher."

Communicative Experiences With School Administration

Four guidance counselors gave no response to the item concerning the scheduling of conferences with the principal and/or the assistant principal. Ten reported that their appointments were scheduled and supplemented by unscheduled ones. Four said their appointments were usually unscheduled but that there were a few which were scheduled. No guidance counselor used the category "hard to arrange."

The principal's attitude towards the counselor and his ability to articulate the counselor's functions with those of other school personnel was sought in an item pertaining to the introduction of the "EIP" team to the faculty. Fourteen guidance counselors reported that the team had been introduced with an accurate description of their respective functions. Only one said they had been introduced with an inaccurate description of their functions. Three stated that they had never been formally introduced to the faculty.

Overall Recommendations of the Guidance Counselors

Thirteen of the eighteen guidance counselors recommended expansion of the "EIP" program, one thought it should be continued as is and three suggested modifications. Two suggested that grades four to six require more attention than they are receiving, one felt that individual therapy provided by social worker and psychologist should be handled outside the school setting but did not elaborate as to reasons for this. One of the three said that her services were spread too thin and that more clinical assistance would be helpful. She also felt the need for increased supplementary services such as remedial work with children and preventive work with parents at the pre-school level.

There were several suggestions made for improving the "EIP" program. Six counselors suggested extending guidance services to grades four, five and six. The addition of days of time for each of the disciplines involved in "EIP" was requested by six counselors. Another specific request made by six counselors was for additional psychological services. Other suggestions made by the counselors for improving the "EIP" program were:

Reading services for the first and second grades
A nursery school program.
Better selection of schools in which to place the program.
A program for the talented and gifted.
Coordination of the services of:
    the school nurse, speech teacher, and reading teachers with those of EIP personnel.
Increased clerical help.
The use of family treatment methods.

The School Psychiatrists Who Participated

By arrangement with the Chief Psychiatrist, Dr. Tieman and Dr. Lolis of the research team met with the eighteen psychiatrists assigned part-time to the schools in the "EIP" program. The meeting was scheduled to last fifty minutes and took place at the Headquarters office of the Bureau of Child Guidance. The psychiatrist's regular bi-monthly meeting was shortened to allow provision for this conference which took place around a long table. The Chief Psychiatrist was present. Individual microphones were provided to facilitate tape recording.

Findings of the Group Interview with the School Psychiatrists

The three major areas touched on in the conference were:

1. The orientation and supervision of the psychiatric staff.
2. The administrative articulation and definition of the roles played by the psychiatrists, psychologists, social workers and guidance counselors who form the "EIP" team.
3. The characteristics of the children referred.

The Orientation and Supervision of the Psychiatric Staff

The needs mentioned in this area were as follows:

1. The need on the part of the psychiatrists for orientation to the work of the Bureau of Child Guidance and to the nature and functioning of the "EIP" program.
2. The need for a clearer definition by the Bureau administration of the role of the psychiatrist in the "EIP" program.
3. The need for emphasis to be placed by the Bureau of Child Guidance administration on the fact that the school to which the psychiatrist is assigned is an "EIP" school and that there is a special program there. It was stated that this should be done at the time the assignment is made.

Administrative Articulation and Definition of the Various Roles of "EIP" Team Members

The role of the Guidance Counselors came up for discussion. One psychiatrist said, "If they are on the clinical team, their role should be defined." The consensus of opinion was that articulation of all the participating departments was required at top echelons of the school system.

The Characteristics of the Children Referred

The psychiatrists stated that they saw many children from the upper grades (four, five and six) rather than children in kindergarten through third grade for whom the program was designed. They gave as a possible reason for this fact that the psychologists and social workers were pressured by school principals into accepting referrals of acting-out children regardless of grade level. Another reason given was the tendency of the team to concern itself with siblings of children referred.

Many of the children referred, according to the psychiatrists, were so seriously disturbed that they could not remain in school and had to be recommended by the psychiatrists for home instruction.

The School Social Workers And Psychologists Who Participated

In the Spring of 1964, the questionnaire was sent citywide to the school psychologist and the social worker in each of the eighteen schools which had a full "EIP" team and no junior guidance classes. The total number of questionnaires sent was thirty-six. Nineteen were returned from eleven out of the eighteen social workers and eight of the eighteen psychologists. Their answers are based on the experience of the 1963-64 school year. OUr findings are based only on the responses of these nineteen people and we can only surmise why their colleagues did not reply and cannot even guess at the nature of their replies.

Characteristics of the School Social Workers and Psychologists Who Replied

The social workers who replied were on the whole an experienced group. One had been with the Bureau of Child

Guidance twenty-two years and two had worked there for seventeen years. Only one had as little as four years of experience at the agency. The median was six years' experience.

Three of them had been in the same school for four years, four had been there for three years, one for two years and three had been assigned at the beginning of the current school year with about eight months of working in the school.

The school psychologists had a median of five years' experience with the Bureau of Child Guidance. One had as much as fourteen years and only one had as little as two and a half years of experience with the agency.

Only one school psychologist had been in the same school as long as three years, four had been there at least two years and three had been there about eight months or since the beginning of the current school year.

The Findings of the School Social Worker And Psychologist Questionnaire

The Degree to Which the Program's Objectives Were Realized

In the development of the questionnaire, questions nineteen through thirty-nine were designed to elicit the clinicians' appraisal of the degree of effectiveness with which the program's objectives have been met. The objectives are those listed in the Elementary School Handbook.

The clinicians were asked to give a rating to each item which would indicate his or her effectiveness in achieving the item's realization in the past year. They used the following scale:

1. Very Effective
2. Effective
3. Not Effective
4. Detrimental
5. I have not been able to function in this area
6. I do not know

The items were ranked in the order of effectiveness with which they were realized as rated by the clinicians. See Tables 9 and 10.

The social workers and psychologists were agreed that the program was very effective in identifying children with incipient emotional problems and in increasing the ability of teachers to spot early signs of behavioral difficulties.

The social workers put the increased ability of teachers to deal with children with emotional problems in third place in effectiveness. The psychologists gave third place to the teachers' increased ability to meet pupil needs.

The social workers rated the identification of children with physical problems as next in effectiveness. Both disciplines were agreed that the program had been effective in improving the mental hygiene educational climate in the school and in improving the understanding of teachers and their effectiveness with children possessed of emotional and learning problems.

Table 9

EIP Program Objectives in Order of Effectiveness with which They Were Realized as Ranked by the Participating School Social Workers

Rank.	Item
1.	How effective was the "EIP" program in the identification of children with incipient emotional problems?
2.	How effective has the "EIP" program been in the ability of teachers to spot early signs of behavioral difficulties?
3.	How effective has the "EIP" team been in helping teachers deal with children with emotional problems?
6.	How effective has the EIP program been in the identification of children with physical problems?
6	How effective has the "EIP" program been in influencing the mental hygiene educational climate in the school?
6	How effective has the "EIP" program been in modifying teacher attitudes toward disturbed children?
6	How effective has the EIP program been in modifying teacher attitudes toward children with learning problems?
6	How effective has the "EIP" program been in increasing the ability of teachers to meet pupils' needs?
6	How effective has the EIP program been in improving the personal-social adjustment of pupils with emotional problems?

EIP Program Objectives (Cont.)

Rank	Item
10.5	How effective was the EIP program in the identification of children with special abilities and talents?
10.5	How effective has the EIP program been in improving parental attitudes toward learning problems of their children?
12.	How effective has the EIP program been in improving parental attitudes toward the emotional problems of their children?
13.	How effectvie has the EIP program been in grouping pupils for classroom organization?
14.	How effective has the EIP program been in working with children with learning problems?
15.	How effective has the EIP program been in improving parental attitudes toward the school and its objectives?
16.	How effective has the EIP program been in increasing the ability of teachers to identify children with special abilities and talents?
17	How effective has the EIP team been in helping teachers to improve their understanding of the emotional problems of pupils?
18	How effective has the EIP program been in developing the special abilities and talents of identified pupils?
19.	How effective has the EIP team been in helping teachers develop the special abilities and talents of children?
20.5	How effective has the EIP team been in increasing teacher awareness of the presence of special abilities and talents in pupils?
20.5	How effective has the EIP program been in improving the personal-social adjustment of other pupils in the class?

Table 10

EIP Program Objectives in Order of Effectiveness with which They Were Realized as Ranked by Eight Participating School Psychologists

Rank	Item
1.	How effective was the EIP program in the identification of children with incipient emotional problems?
3.5	How effective has the EIP program been in the ability of teachers to spot early signs of behavioral difficulties?
3.5	How effective has the EIP program been in increasing the ability of teachers to meet pupils' needs?
3.5	How effective has the EIP team been in helping teachers to improve their understanding of the emotional problems of pupils?
3.5	How effective has the EIP team been in helping teachers deal with children with emotional problems?
6.	How effective has the EIP program been in modifying teacher attitudes toward children with learning problems?
7.5	How effective has the EIP program been in influencing the mental hygiene educational climate in the school?
7.5	How effective has the EIP program been in modifying teacher attitudes toward disturbed children?
9.	How effective has the EIP program been in the identification of children with physical problems?
10.	How effective has the EIP program been in working with children with learning problems?
11.	How effective has the EIP program been in improving the personal-social adjustment of pupils with emotional problems?
12.	How effective was the EIP program in the identification of children with special abilities and talents?
13.	How effective has the EIP program been in improving attitudes toward the school and its objectives? Comment:
14.5	How effective has the EIP program been in improving on parental attitudes toward the emotional problems of their children?
14.5	How effective has the EIP program been in grouping pupils for classroom organization?

EIP Program Objectives (Cont.)

Rank	Item
16.	How effective has the "EIP" program been in developing the special abilities and talents of identified pupils?
17.5	How effective has the "EIP" program been in improving parental attitudes toward learning problems of their children?
17.5	How effective has the "EIP" program been in improving the personal-social adjustment of the other pupils in the class?
19.	How effective has the "EIP" program been in increasing the ability of teachers to identify children with special abilities and talents?
20.5	How effective has the "EIP" team been in increasing teacher awareness of the presence of special abilities and talents in pupils?
20.5	How effective has the "EIP" team been in helping teachers develop the special abilities and talents of children?

Neither the social workers nor the psychologists thought the program had been as effective in improving the personal-social adjustment of the other (than disturbed) pupils in the class, as it had been with other program objectives. Nor did they give a high rank to the program's effectiveness in recognizing or developing special abilities and talents among children.

The Overall Effectiveness of the Program

The eleven social workers who replied gave a total of 230 responses to questions nineteen through thirty-nine (the questions which itemized the various objectives of the "EIP" program.) The eight psychologists who replied gave a total of 163 responses to this group of twenty-one questions. These data are reported in Table 11.

Table 11

	Social Workers		Psychologists	
	No. of Replies	Per Cent of Replies	No. of Replies	Per Cent of Replies
1. Very Effective	22	10%	25	15%
2. Effective	120	52%	61	37%
3. Not Effective	23	10%	19	12%
4. Detrimental	0	0%	0	0%
5. I have not been able to function in this area	32	14%	26.	16%
6. I don't know	33	14%	32	20%
Total	230	100%	163	100%

The psychologists and social workers both used the effective and very effective categories over half the time. Sixty-two per cent of the social workers' responses and fifty-two per cent of the psychologists' responses were in these categories. Ten per cent of the social workers' responses were in the "Not Effective" category and twelve per cent of the social workers' replies were in the categories of "I have not been able to function in this area" and "I don't know" while thirty-six per cent of the psychologists' replies were in this category.

Both disciplines agreed that the identification and development of special abilities and talents in children had been neglected by the program. In this they were in substantial agreement with teachers and principals.

Social workers and psychologists found the program ineffective in improving the personal-social adjustment of the other pupils in the class. The psychologists were not sure of improvement in parental attitudes towards learning and emotional probleme of their children nor towards the school and its objectives. The psychologists did not rate the groupint of pupils for classroom organization as an effective part of the program.

Distribution of Clinician's Time By Grade Level and Activity

The "EIP" program was designed to service children from kindergarten through third grade, but the actual use of a clinician's time often is subject to pressure by the needs of the school.

The social workers reported that they spent 78% of their time in activities concerning children in grades kindergarten through third and 22% of their time in grades four through six. Of the total time spent in grades four through six, only 34% of it was used in following up children first known to them when in kindergarten through third grade.

The psychologists spent 79% of their time with children in kindergarten through third grade and 21% of their time with children in fourth through sixth grade. Only 20% of the total time they devoted to the older children was spent in follow-up work. Therefore, approximately 15% of the psychologist's time was given to new cases at the fourth to sixth grade level, thus diluting the service available for the primary purpose of the "EIP" program service to the youngest school children.

The social workers reported that they divided their time according to the following distribution:

Servicing workable cases	34%
Conferences with guidance counselor	15%
Intake	14%
Emergencies and unworkable cases	12%
Other activities	7%
Broken appointments with parents	6%
Screening	6%
Meetings or other conferences	6%
	100%

The psychologists report the following distributions of their time:

Servicing workable cases	32%
Other	19%
Conferences with guidance counselors	15%
Screening	10%
Emergencies and unworkable cases	10%
Meetings or other conferences	7%
Intake	5%
Broken appointments with parents	2%
	100%

Both disciplines had recommendations to make as to how they could profitably redistribute their time. The social workers would like to spend less on screening, "emergencies," broken appointments, cases where there will only be a "one-time" contact, and cases where teachers do not cooperate. They would like to spend more time with individual children, with children in kindergarten, first and second grades and more time on "meaningful referrals." The psychologists would like to spend less time on cases where they have to depend upon the cooperation of reluctant teachers, have fewer unproductive conferences and spend less time in doing diagnostic studies on unworkable cases for whom there are no referral resources. They would like to spend more time on workable cases.

Coordination of the Efforts of the "EIP" Personnel

The principals raised questions about the coordination among team members. The clinicians were queried on the degree of overlapping of functions among the psychologist, social worker and guidance counselor. Six of the eleven social workers reported overlapping and four of the eight psychologists reported it.

Social workers particularly complained of confusion for the parent who is seen by the social worker for therapy and is also sent for by the guidance counselor; "the parent doesn't know to whom he relates." Also mentioned as detrimental activities on the part of the guidance counselor were: violations of confidentiality, in an attempt to give teachers "understanding," entrance into inappropriate areas of family-history and advice-giving, and invasions of privacy. One social worker complained, "it prevents the parents from wanting help."

Psychologists reiterated the social workers' statements mentioning too that "the parent is hardened against any further contact" as the guidance counselor who does the interviewing sees the parent with an orientation and discipline different from that of the clinician's. One psychologist complained that the guidance counselor did not always tell the other team members what the content of interviews had been. Another stated that the guidance counselor holds cases too long before referring them. The clinicians gave as possible causes of overlapping the following:

1. The need for guidance counselors to see too many cases which combined with excessive paper work, leads to short, rather than properly prepared for, formal conferences.

2. Personality factors of team members.
3. Lack of planning among team members and serious communication problems.
4. The guidance counselor is in the school five days a week and the clinician only two.
5. Services have not been clearly delineated in the eyes of school personnel.
6. Poorly defined formulation of roles in the original plan for "EIP" and no central supervision for the program.
7. Rivalry between Bureaus (Educational and Vocational Guidance and Child Guidance)
8. Variation in the training of different disciplines.
9. Guidance counselors are trained to amass as much information as possible about each pupil.

The clinicians recommended changes which they thought would eliminate the bad effects of overlap in services:

1. The Bureau of Educational and Vocational Guidance and the Bureau of Child Guidance need to jointly define goals and clarify the roles of various disciplines to structure areas of responsibility.
2. The number of cases seen needs to be limited so that team members can share information with each other and coordinate findings.
3. The time of the clinicians in the school should be increased so that it is in equal balance with the guidance counselors.
4. The provision of training for guidance counselors in interviewing and in concepts of professional confidentiality. In-service training through orientation meetings and seminars with the clinical staff.

Relationships with School Personnel

Communication

Problems in communication were mentioned by the clinical staff. The clinicians found their orientation was different from that of other school personnel. The schools frequently, and of necessity, are concerned with discipline and the ongoingness of a school program. The conferences so necessary to the clinician's proper functioning, are not regarded with the same urgency by school personnel and are not always planned for. This results in disruption of classroom time for the teachers and inadequate conferences due to the distractions of the classroom. Thus, findings and recommendations are often conveyed to teachers in a haphazard manner. This, coupled with apparent resistance on the part of teachers makes it difficult for clinicians to work through on cases referred to them. Clinicians also commented that they needed more conference time with principals and that they wanted it at a regular time. Some clinicians felt the communication difficulties were symptomatic of basic barriers in understanding between educators and clinicians. Teachers are reported to have verbalized to clinicians that they think the remedy lies in smaller class size and extra remedial help rather than in auxiliary help.

The clinicians made several suggestions for the improvement of communication with school personnel:

1. Administrative action is needed to coordinate personnel and schedule adequate conference time.
2. Further orientation of clinical personnel to school needs and limitations.
3. Further orientation of principals and teachers so that their expectations will be more realistic.

The School's Orientation to the Program

Seven of the eleven social workers and three of the eight psychologists reported that the schools in which they worked were well oriented to the program. One commented, "The principal is open to involvement on cases and implements recommendations promptly." Another said, "Principal and teachers unusually sensitive and cooperative with excellent professional standards." A third found the school well oriented to mental hygiene but added, "their demands far exceed the cases we can handle in the time allotted to the school."

Two of those who found a lack of orientation felt it was because many teachers in their respective schools were new. One school which was reported to be unable to "accept the team except for the suspense of children" had extreme neighborhood problems and had had two principals in one year.

Negatives in school-orientation were also explained on other bases. Poor teacher morale was mentioned in more than one instance. An emphasis on harsh discipline, concentration only on problems rather than preventive work and teacher unwillingness to become involved were mentioned more than once as factors in poor orientation.

The School's Expectations of the Team

Only two of the eleven social workers and three of the eight psychologists found the school's expectations realistic. The rest found the schools wanted immediate amelioration of long-standing, deep-seated problems or prompt removal of children who are upsetting. The numbers of children referred are far beyond the compass of reasonable caseload. There appears to be a misunderstanding of the concept of a psychiatric clinic. Perhaps because it is in a school setting, some principals believe it should be school administered, even though school personnel are not trained in psychiatry. As one social worker phrased it, "The school thinks the team is directly and exclusively accountable to them and does not realize that psychiatric team function is defined by an administration outside the school. The school expects us to do what they order." Another commented, "some teachers expect miracles."

The Clinicians' Role in the Schools As They Saw it Themselves

The Greatest Accomplishments of the "EIP" Program

Three of the eight psychologists who replied thought the program contributed the most through its work with teachers. They mentioned the positive climate in the school accorded their service, the improved mental hygiene awareness among teachers and greater success on the part of the individual teacher in coping with learning problems within the framework of a regular classroom.

Two others mention their function in suspensions; one streeses a role in "prevention of wholesale suspensions." The other commented on the team's early identification of severely disturbed children with resultant certification for medical suspense.

Help to children was cited by two other psychologists as the greatest accomplishment of the "EIP" program. One phrased it, "apparent improvement of the children we have undertaken to work with" and the other, "helping a few emotionally disturbed children and their parents." The eighth psychologist cryptically mentioned a school "Book Fair" as the program's greatest contribution.

Four of the eleven social workers mentioned the positive effect of the program on teachers' awareness of mental hygiene. One thought a workshop the "EIP" team had conducted was instrumental in improving the mental hygiene atmosphere in the school. Another mentioned on-going contacts with teachers. Still another noted that teachers' attitudes changed enough to enable them to modify their classroom handling of children.

Five of the eleven social workers saw benefits to individual children. One said, "a number of children with problems, and learning disabilities were identified." Another said there was "one to one help in cases we could take on." Other comments were, "Some help given to individual children and parents," and "improvement in the individual children with whom we have worked."

Four social workers mentioned the program's involvement in the removal of children from regular classes. Three saw themselves in the role of implementing placements in institutions, 600 schools, special classes for the retarded, the brain-damaged and the disturbed, as well as facilitating medical suspense. One stressed the team's role in maintaining children in school who would otherwise be suspended.

The Clinicians' Thoughts On Selection of Schools for an "EIP" Program

Appropriateness of Selection of the School to which the Team is Assigned.

Four of the eight psychologists and seven of the eleven social workers reported that the school to which they were assigned was an appropriate one for the functioning of an "EIP" program. To support their opinion they cited the following assets in the schools:

1. Cohesion between the school and clinical personnel
2. Good school administration
3. Low teacher turnover
4. Plentitude of special service personnel
5. Adequate school building
6. School population contains many children of business and professional people
7. There are many problems in evidence in the early grades which should be reached promptly

Those who found the choice of school in which they were working inappropriate gave several reasons. Among them were frequent changes of administrative and/or teaching personnel. One worker's statement is a summary of many: "The school is too big and full of problems for the type of service we can offer. It would make sense to have us here if we could offer a saturation program with all the auxiliary services. Otherwise, our very presence points up the lacks in service." Another commented, "---so many multi-problem families. The problems would be identified without an "EIP" team."

Suggested Criteria for the Selection of a School.

If the clinicians could choose a school in which to work it would have the following characteristics:

1. A stable administration and corps of teachers who are highly professional in orientation and who are receptive to a psychiatric service, which is supervised outside the school, have realistic expectations of it and who wish to involve themselves in helping children rather than get rid of them.
2. A school population such that provides cases which lend themselves to involvement in help; an interested and reachable parent group.
3. Easy availability of special services and referral resources.

The Clinicians' Suggestions For Improving the "EIP" Program

Three psychologists wanted more time in the school or an administrative limit placed on the number of cases they would have to handle. One suggested a full-time assignment in the school as a whole with part of that time given to the work of the early grades. Another suggested the assignment of an additional guidance counselor to handle follow-up in grades four to six. The third would like therapeutic clinics to be placed in these schools themselves as there are "too many identified cases and no services available."

Closely related to the above plea are statements such as "more special services in the community or school system for children who cannot be maintained in regular classes," and "community agency service as an additional resource on a contact basis."

Improvement in supervisory and administrative processes governing the "EIP" team were recommended. Increased orientation meetings for team members and the administration was recommended. Another suggestion was that supervision be coordinated for the whole team rather than given by separate supervisors licensed in each discipline.

Five of the eleven social workers reported the need for the assignment of more social work time in EIP schools. One specified that two days a week should be reserved exclusively for the treatment of individuals and the rest of the week be spent in the identification of potentially gifted children, meetings with principals, consultative help and family education. Another recommended more time for educating teachers in mental hygiene concepts and orienting them to "EIP". Two mentioned the artificiality of the third grade cut-off point for their services. Two stressed the need for increased outside agency service. As one put it, "Finding children who need help has no meaning if there are no facilities."

Supplementary Services Recommended by the Clinicians

Five of the eleven social workers and two of the eight psychologists recommended additional remedial service.

Two social workers felt the need for junior guidance classes and one for a vestibule class (for very young mentally retarded children). One psychologist asked for a pre-school program and another for extra speech teachers and additional help from the school medical department.

Modifications in the "EIP" Program Recommended by the Clinicians

Some of the modifications were in the category of improving working relationships among the persons on the "EIP" team and between them and school personnel. Many wished improvement in teacher and principal attitudes. One psychologist phrased it as a need for "orientation of school personnel so they won't feel threatened by the team's presence," and added the need to "control requests so that clinicians will not be distracted by constant emergencies," and there is a minimum of "referrals of children in grades four, five and six."

Another source of frustration resulting from inadequate control of service requests was the "parents who are not ready for contact or reachable." Another wished for "changes in school population in the direction of the middle income level."

One psychologist wanted the program "discontinued unless there is a new school administration, new staff and a new population."

Three clinicians mentioned the need for better articulations with community services and mental health resources. One stated, "other clinics cut services to the school giving the presence of "EIP" as the reason."

SUMMARY

The present findings are based on a city-wide survey of the personnel working in all the eighteen elementary schools which had a full complement of "EIP" personnel assigned but which did not have junior guidance classes in the academic year 1963-64. The principals, teachers and special personnel whose assignments brought them in contact with children from kindergarten through fourth grade--guidance counselors, school psychologists, school social workers and school psychiatrists--were invited to fill out questionnaires specially prepared for each group after conferences with representative group members. The respondents were assured anonymity and given stamped envelopes, addressed to the research team in which to return their completed instruments.

The questionnaires were designed to enable the personnel most concerned to rate the program's effectiveness in terms of its objectives.

The Findings of the Principal's Questionnaire

Of the seventeen principals who replied, twelve recommended an expansion of the program, two were satisfied with it as it is and three recommended its complete discontinuance even though it would mean a loss of service and personnel in their schools.

Nine of the seventeen suggested as alternatives, should the program be discontinued, full-time guidance counselors, or an additional assistant principal. Others wanted "more suspensions, junior guidance classes, and much smaller overall class registers," as a solution to their problems if "EIP" were discontinued.

The reactions of the principals to the "EIP" program on the whole could be described as mildly favorable. In most instances principals appreciated the services rendered to children, the work done with parents and teachers and the fact that the previous onerous administrative chore of referring children to agencies was now being shared. It was indicated that the teams served in schools with varied problems in a variety of ways.

Operationally, there was need for better communication with school staff and for better articulation of the roles that the three professions of counseling, social work and psychology were to play in the school setting and with each other.

Most serious seemed to be the lack of referral resources so that "EIP" personnel spent a preponderance of time identifying emotionally needy children for whom no further service was provided. The presence of a mental hygiene team in a school encourages referrals which then cannot be handled. Furthermore, the time of a three-discipline staff as well as the time of the teacher and her supervisors is being used in the identification process, thus reducing an entire team with high-level mental hygiene skills to becoming simply an agent of referral. To compound this situation is the added frustration for the team of being in receipt of referrals of extremely difficult children whose parents are not motivated to appear for, welcome, or accept mental hygiene help.

A majority of the principals recommended expansion of the program, particularly in form of an increased staff of guidance counselors, as a way of solving the program's inherent ills. Perhaps a further remedial measure could be the use of the psychological and social work staff as a referral resource for children with cooperative families leaving the job of referral agent to the guidance counselor.

Findings of the Teacher's Questionnaire

About forty-seven per cent of the 597 teachers returned their questionnaires; the findings based on the analyses of these data must be regarded in the light of the paucity of the return and there is no way of knowing the reasons why fifty-three per cent of the teaching personnel involved did not reply or what they would have said.

In rating the program on its success in meeting its objectives, the 273 teachers gave a total of 5,544 responses to twenty-one questions, each of which could be answered on a one-to-five point scale. 38.5 per cent of these responses were in "helpful" categories, while 24.8 per cent were in "not helpful" or "detrimental" categories and 36.1 per cent of the responses indicated that the aspect of the program being rated was not functioning at all as far as the teacher was concerned.

Only 121 teachers or twenty per cent of the total queried reported that the program was effective in the personal-social adjustments of pupils with emotional problems. However, fifty-seven per cent of the teachers responding found that the program was helpful in identifying children with incipient emotional problems. Only twenty-three per cent of the teachers responding reported the program of value in working with children with learning problems. There was agreement with the principals in that few found the program to be helpful in identifying and developing the special abilities and talents of pupils.

174 or sixty-six per cent of the teachers who replied wanted the program expanded while seventeen per cent wanted it modified, six per cent wanted it continued as it is, five per cent wanted it discontinued and twelve teachers made no recommendations as to continuance.

The experience of seeing a child worked with in individual psychotherapy by a psychologist or social worker coupled with interpretive conferences with the teacher was reported by 145 or fifty-five per cent of the teachers while forty-two per cent said they never had this experience and five teachers did not reply at all. Thirty-one or twelve per cent of the 145 teachers found improvement in the child who was thus treated. Thus, in spite of increased personnel assigned to the schools because of the "EIP" program, individual clinical service is still in short supply as far as the teachers are concerned.

However, the teachers found the program helpful in its effect on teacher attitudes towards disturbed children, parental attitudes towards disturbed children and the program's ability to actually identify disturbed children. They did not find it so helpful in working with children with learning problems or in identifying and developing the special abilities and talents of pupils.

In the matter of conferences with "EIP" team members, teachers who found the program most helpful were those who reported that conferences were easy to arrange. The ease with which a teacher could arrange conferences was more important than the actual number of conferences held. Teachers in the second and third grade were the ones who had the most contact with team members; the highest percentage of teachers reporting favorably on the program was also found in these two grades. Grade conferences were most fruitful with teachers who had one to three years experience, but were not rated so well by teachers who were in their beginning year or in later years.

General parental cooperation with the school as rated by the teachers was highly associated with the helpfulness of the program as seen by the teachers. There was also a highly significant relationship between parental cooperation as seen by teachers and the program's effectiveness in improving parental attitudes towards the emotional problems of their children. Therefore, the program is seen to be most successful in improving parents' attitudes towards the emotional problems of their children when it is placed in a school where the parents are disposed to be cooperative in the first place.

Findings of the Guidance Counselors Questionnaire

All eighteen counselors queried returned their questionnaires. In comparison to the principals, teachers and clinicians included in this survey, guidance counselors are a group relatively inexperienced in their profession; none had more than five years' experience.

They reported the program most successful in identifying children with emotional problems and in increasing the ability of teachers to spot early signs of behavioral difficulties. As did other personnel surveyed, they rated poorly the program's ability to identify and develop the special abilities and talents of pupils. The guidance counselors found conferences and communication with the clinicians and school personnel to be easy to arrange and productive per haps because they were in the school all the time. All the guidance counselors were enthusiastic as to the over-all success of the program with the majority of them recommending expansion. They would like to have more guidance and clinical service in the school, and extend the program to the upper grades. They also felt the need for increased supplementary services. A plea was also made for better selection of schools in which to place the program.

Findings of the School Psychiatrist's Questionnaire

Because of the lack of responses to questionnaires sent them, a group interview was held by the research team with all the psychiatrists participating in the program. The interview was tape recorded by means of individual microphones provided each psychiatrist.

The psychiatrists stated the need for their supervisors and the administration of the Bureau of Child Guidance to provide them with orientation to the work of the Bureau, the nature and functioning of the "EIP" program, a definition of the rold of the psychiatrist in the program and they felt that they should be told at the time the assignment is made and if the school is in the "EIP" program.

The psychiatrists cited the need for articulation at top echelons of the school system of the work of the Bureau of Educational and Vocational Guidance and the work of the Bureau of Child Guidance with particular attention being paid to defining a role for the guidance counselors who were seen by some psychiatrists to be stepping over into clinical work for which they were not trained. The psychiatrists also mentioned that many of the children referred to them were so seriously disturbed that they could not remain in school but they had to be recommended for home instruction and they also commented on the great number of referrals of acting-out children. They felt they were being used for diagnostic and administrative purposes rather than primarily for psychotherapy.

Findings of the Clinician's Questionnaire (Psychologists and Social Workers)

These findings are based on the responses of a very few people: only eleven social workers and eight psychologists of the total of eighteen each replied. Those who replied were, on the whole, an experienced group.

There was agreement that the program was effective in identifying children with incipient emotional problems and in increasing the ability of teachers to spot early signs of behavioral difficulties. Ranked low by both groups was the program's effectiveness in identifying and developing special abilities and talents of children. The clinicians did not report the program effective in improving the personal-social adjustment of the other (than disturbed) pupils in the class.

Both groups report spending about a third of their time servicing workable cases. Much of their time (fifteen per cent) was spent in conferences with guidance counselors. Redistribution of time in the direction of less on screening, and uncooperative cases and more time on treatment of workable cases was desired by both groups. The clinicians complained that overlapping between their functions and the practices of the guidance counselors, particularly in the area of parent interviewing, resulted in confusion for the parent and violations of confidentiality. Clinicians saw this as a barrier to parental acceptance of help. The clinicians wished clarification of the roles of various disciplines with structured areas of responsibility, a limitation in number of cases to enhance the sharing of information and coordination of findings among team members, and in service training for guidance counselors in interviewing and in concepts of professional confidentiality.

Social Worker-Psychologist Questionnaire
(cont.)

____34. How effective has the EIP program been in grouping pupils for classroom organization? Comment:

____35. How effective has the EIP team been in helping teachers to improve their understanding of the emotional problems of pupils? Comment:

____36. How effective has the EIP team been in increasing teacher awareness of the presence of special abilities and talents in pupils? Comment:

____37. How effective has the EIP team been in helping teachers deal with children with emotional problems? Comment:

____38. How effective has the EIP team been in helping teachers develop the special abilities and talents of children? Comment:

____39. How effective has the EIP program been in working with children with learning problems? Comment:

Section III

40. A. What was the greatest accomplishment of the EIP program in your school?

B. What suggestions do you have for improving the EIP program?

41. All things considered, EIP should be: (check one)

____1. Continued as it is
____2. Expanded
____3. Modified
____4. Discontinued

If you checked 3 or 4, what suggestions have you for modifying the EIP program that you did not mention in B above or what type of program or activity would you suggest in lieu of the EIP program.

The clinicians saw a need for improved communication with school personnel and suggested that school administrators act to coordinate personnel and schedule adequate conference time. The clinicians also wished a deeper knowledge of school needs and limitations and would like to see orientation of principals and teachers so that the school's expectations of clinicians will be more realistic. The clinicians thought that optimal chances for the success of an "EIP" program would be found in a school where there was a stable administration and corps of teachers highly professional in orientation, receptive to a psychiatric service, which gets its supervision outside the school, possessed of realistic expectations of this service and of a wish to involve themselves in helping children rather than in getting rid of them. Also needed, from the clinicians point of view, is a school population lending itself to involvement in help with interested and reachable parents. Additionally desirable would be the easy availability of special services and referral resources.

CONCLUSIONS

The Early Identification and Prevention Program underwent a cross-sectional survey in the academic year 1963-64 by means of a questionnaire which was sent city-wide to principals, teachers, guidance counselors, and clinicians working in eighteen schools which had a full complement of "EIP" staff and which did not have a junior guidance program.

The cost of placing Bureau of Child Guidance personnel in these eighteen schools for that academic year was $234,326.00*. The cost of placing a guidance counselor in an "EIP" program in eighteen schools, exclusive of supplies which were furnished by the school and the use of office space, also furnished by the school, was $168,476.00 This brings the total cost of the program in eighteen, or half its schools, without school plant overhead, to $402,802.00. According to figures released by the Bureau of Child Guidance, 983 children in those schools received attention which required a number of contacts, while 1,805 children benefited from consultative work which required, usually, just one contact. 145 teachers in the eighteen schools reported the experience of regular conferences with clinicians who were working intensively with one child over a long period of time.

Figures are available as to service rendered by guidance counselors in thirty-seven schools in the "EIP" program in 1963-64. By taking 18/37 of each figure it is possible to approximate the service given in the eighteen schools under consideration. The counselors, then in the eighteen schools, by estimate, interviewed 4,528 children. They had six or more interviews with 671 of these children. Of the 4,528 children, at least 648 were referred by them to the Bureau of Child Guidance. The counselors in eighteen schools interviewed approximately 2,168 parents. They held approximately 8,462 conferences with teachers, other pupil personnel workers and personnel from community agencies.

All personnel surveyed were agreed that the program was effective in identifying children with incipient emotional problems but long-range therapeutic clinical service for individual children was seen to be in critical short supply and referral resources which would provide this were reported as deplorably few.

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* See appendix for breakdown of cost figures.

Operationally, there was need for better articulation of the roles the three professions of counseling, social work and psychology were to play in the school setting and with each other. Communication between school and clinical personnel needs improvement. The program was reported to have worked best in those schools where parents were seen as cooperative and able to respond to traditional case work procedures.

APPENDIX

COSTS, PRINCIPAL'S QUESTIONNAIRE, TEACHER'S QUESTIONNAIRE, GUIDANCE COUNSELOR'S QUESTIONNAIRE, SCHOOL SOCIAL WORKER'S AND SCHOOL PSYCHOLOGIST'S QUESTIONNAIRE.

COSTS OF EARLY IDENTIFICATION AND PREVENTION PROGRAM IN EIGHTEEN FULLY STAFFED SCHOOLS IN 1963-64

Bureau of Child Guidance Costs*

Nine psychologists at a median salary of $9,050.00	$81,450.00
Nine social workers at a median salary of $9,050.00	81,450.00
Supervision of psychologists	7,901.00
Supervision of social workers	9,856.00
Two full-time psychiatric positions (to provide each of the eighteen schools with one and a half hours a week)	20,200.00
BCG Administrative Personnel (Assistant Director and Director)	4,470.00
BCG Secretarial and Clerical Service	22,000.00
Supplies and rent of BCG premises used by EIP staff	6,999.00
Miscellaneous Eighteen telephones at $108.00 each	1,944.00
	$236,270.00

Bureau of Educational and Vocational Guidance

Eighteen Guidance Counselors (median annual salary $9,050.00)	$162,900.00
Supervision of Guidance Counselors	2,160.00
BEVG Administration (Coordinator of EIP Program and Director of BEVG)	2,540.00
BEVG Secretarial Services	450.00
Supplies Provided by individual schools	
	$168,050.00
TOTAL	$404,320.00

P.N. 22-300
2-64-50

BOARD OF EDUCATION OF THE CITY OF NEW YORK
Bureau of Educational Research

EVALUATION OF EARLY IDENTIFICATION AND PREVENTION PROGRAM

Total Supervisory experience ___ Yrs. ___ Mos.

How long at this school? ___ Yrs. ___ Mos.

Supervisory experience in an EIP school ___ Yrs. ___ Mos.

Principal Questionnaire

This instrument was developed on the basis of the objectives of the Early Identification and Prevention Program ("EIP). Indicate your response to each item by circling the appropriate number corresponding to the code shown below. Your answers need not depend on your personal experience with the BCG and BEVG personnel. Your observations of the operation of the Program in general in your school would serve as a valid point of reference, as well. A self-addressed envelope has been enclosed for your convenience in mailing this directly to the evaluation committee. You are assured anonymity and confidentiality.

The results of the EIP were in the following areas:

5 - Very Helpful
4 - Helpful
3 - Limited Helpfulness
2 - Not Helpful
1 - Detrimental
0 - Not Observed

Circle one for each item — Items

I. 0 1 2 3 4 5 - A. Identification by the EIP Team of children with special abilities and talents

0 1 2 3 4 5 - B. Identification by the EIP Team of children with incipient emotional problems

0 1 2 3 4 5 - C. Identification by the EIP Team of children with physical problems

0 1 2 3 4 5 - D. The mental hygiene educational climate in the school as influenced by the EIP Team

0 1 2 3 4 5 - E. Provisions by the EIP Team for the development of special abilities and talents of identified pupils

II. 0 1 2 3 4 5 - F. Teacher attitudes toward disturbed children

0 1 2 3 4 5 - G. Teacher attitudes toward children with learning problems

0 1 2 3 4 5 - H. Ability of teachers to spot early signs of behavioral difficulties

0 1 2 3 4 5 - I. Ability of teachers to meet pupil needs more effectively

0 1 2 3 4 5 - J. Ability of teachers to identify children with special abilities and talents

Circle one for each item	Items
III. 0 1 2 3 4 5 - K.	Parental attitudes toward the school and its objectives
0 1 2 3 4 5 - L.	Parental attitudes toward emotional problems of their children
0 1 2 3 4 5 - M.	Parental attitudes toward learning problems of their children
0 1 2 3 4 5 - N.	Personal-social adjustment of pupils with emotional problems
0 1 2 3 4 5 - O.	Personal-social adjustment of all other pupils in the school
0 1 2 3 4 5 - P.	Grouping pupils for classroom organization

IV. 1 - In which specific ways has the Early Identification and Prevention Program served the needs of your school? ____________________

2 - In which specific ways has the program failed to carry out the needs of your school as you see them? ____________________

3 - As principal indicate any changes you feel would improve the EIP program

____

4.1- All things considered, EIP in your school shoud be: (check one)

Continued as is ____
Expanded ____
Modified ____
Discontinued ____

4.2- Alternative if discontinued ____________________

4.3- Any other comments on choices in 4.1 ____________________

PN. 22-300 February 14, 1964

BOARD OF EDUCATION OF THE CITY OF NEW YORK
BUREAU OF EDUCATIONAL RESEARCH

Teacher Questionnaire on the Early Identification and Prevention Program

This instrument was developed on the basis of the objectives of the Early Identification and Prevention Program (EIP). Your answers need not depend solely on your personal experiences with the BCG and BEVG personnel. Your observations of the Program in your school would also serve as a point of reference. The names of the social-worker, psychologist and guidance counselor who are on the EIP team may be found on the school organization sheet. A self-addressed, stamped envelope has been enclosed for your convenience in mailing this directly to the evaluation committee. You are assured anonymity. Since we want your opinion, please do not discuss your answers with anyone. Thank you.

SECTION I

Directions:

Section I contains items 1-10. Since your responses are to be keypunched, it is necessary for you to put a check mark (✓) in front of one and only one response to each item.

1. Please check the total number of years you have been teaching.

____1. Less than one year
____2. One to three years
____3. Four to seven years
____4. Eight to nineteen years
____5. Twenty or more years

2. Indicate with a check mark (✓) the number of years you have been teaching in this school.

_____1. Less than one year
_____2. One to three years
_____3. Four to seven years
_____4. Eight to nineteen years
_____5. Twenty or more years

3. In your experience this year (1963-64), conferences with the EIP team have been (check one):

_____1. scheduled appointments supplemented by unscheduled ones.
_____2. usually scheduled.
_____3. usually unscheduled, but with a few scheduled ones.
_____4. unscheduled, but easy to arrange.
_____5. unscheduled and hard to arrange due to time pressures either on me or on the EIP staff.
_____6. unscheduled and hard to arrange for other reasons.

Teacher Questionnaire
Page 2

4. In previous years, conferences with EIP staff have been (check one):
____1. scheduled appointments supplemented by unscheduled ones.
____2. usually scheduled.
____3. usually unscheduled, but with a few scheduled ones.
____4. unscheduled, but easy to arrange.
____5. unscheduled, but hard to arrange due to time pressures either on me or on the EIP staff.
____6. unscheduled, because there was no EIP team in the school.
____7. unscheduled for other reasons.

5. Approximately how many contacts have you had with members of the EIP team this year? (check one)
____1. Over 10
____2. 6 to 10
____3. 1 to 5
____4. None.

6. If there was an EIP team in the school where you worked in previous years, how did the number of contacts compare with those this year (check one)?
____1. More
____2. About the same.
____3. Fewer.
____4. There was no EIP team.

7. The EIP team sometimes can manage to work with a child once a week or oftener. When they combine this with conferences designed to help you understand the child better (check one):
____1. You find the child gradually improves in the classroom.
____2. Perhaps the child is better for it, but you don't see any improvement in your class.
____3. You have never had this experience.
____4. The child may not be better but you can tolerate him more and go on with your teaching with less interference than before.

8. Parental cooperation is essantial to the success of a program like the EIP program. In your school parents (check one):
____1. Generally keep appointments and are helpful.
____2. Generally don't keep appointments.
____3. Generally keep appointments, but do not cooperate.
____4. Generally don't keep appointments but do cooperate.
____5. Most do not keep appointments, but those who do, cooperate.

9. You have found communication with EIP staff on children and parents with whom they work (check one):
____1. Close and mutual.
____2. Adequate.
____3. Inadequate.

SECTION II

Directions for rating:

Section II consists of 21 items; items 10-30. Rate each item as to EIP effectiveness this school year in terms of the five point code (1-5) given below by putting the number of your estimate of effectiveness on the line in the left margin in front of the item. Do not omit any item.

CODE

1. very helpful
2. helpful
3. not helpful
4. detrimental
5. not functioning as far as I am concerned.

___10. How valuable was the EIP program in the identification of children with special abilities and talents?

___11. How valuable was the EIP program in the identification of children with incipient emotional problems?

___12. How valuable was the EIP program in the identification of children with physical problems?

___13. How valuable has been the EIP program in influencing the mental hygiene educational climate in the school?

___14. How valuable has been the EIP program in developing the special abilities and talents of identified pupils?

___15. What has been the effect on the EIP program on teacher attitudes toward disturbed children.

___16. What has been the effect of the EIP program on teacher attitudes toward children with learning problems?

___17. What has been the effect of the EIP program on the ability of teachers to spot early signs of behavioral difficulties?

___18. What has been the effect of the EIP program on the ability of teachers to meet pupils' needs?

___19. What has been the effect of the EIP program on the ability of teachers to identify children with special abilities and talents?

___20. What has been the effect of the EIP program on parental attitudes toward the school and its objectives?

___21. What has been the effect of the EIP program on parental attitudes toward the emotional problems of their children?

___22. What has been the effect of the EIP program on parental attitudes toward learning problems of their children?

___23. What has been the effect of the EIP program on the personal-social adjustment of pupils with emotional problems?

___24. What has been the effect of the EIP program on the personal-social adjustment of the other pupils in the class?

___25. Of what assistance has the EIP program been in grouping pupils for classroom organization?

___26. How useful has the EIP team been in helping you to improve your understanding of the emotional problems of your pupils?

Guidance Counselor Questionnaire (cont)

Section II

Directions: Put a check mark in front of one and only one response to each item.

13. In your experience this year (1963-64), conferences with the BCG have been (check one):

_____1. Scheduled appointments supplemented by unscheduled ones.
_____2. Usually scheduled.
_____3. Usually unscheduled, but with a few scheduled ones.
_____4. Unscheduled, but easy to arrange.
_____5. Unscheduled and hard to arrange due to time pressures either on me or on the EIP staff.
_____6. Unscheduled and hard to arrange for other reasons.

14. In previous years, conferences with BCG have been (check one):

_____1. Scheduled appointments supplemented by unscheduled ones.
_____2. Usually scheduled.
_____3. Usually unscheduled, but with a few scheduled ones.
_____4 Unscheduled, but easy to arrange.
_____5. Unscheduled but hard to arrange due to time pressures either on me or on the EIP staff.
_____6. Unscheduled, because there was no EIP team in the school.
_____7. Unscheduled for other reasons.

15. In your experience this year (1963-64), conferences with teachers have been (check one):

_____1. Scheduled appointments supplemented by unscheduled ones.
_____2. Usually scheduled.
_____3. Usually unscheduled, but with a few scheduled ones.
_____4. Unscheduled, but easy to arrange.
_____5. Unscheduled and hard to arrange due to time pressures either on me or on the EIP staff.
_____6. Unscheduled and hard to arrange for other reasons.

16. In previous years conferences with teachers have been (check one):

_____1. Scheduled appointments supplemented by unscheduled ones.
_____2. Usually scheduled.
_____3. Usually unscheduled, but with a few scheduled ones.
_____4. Unscheduled, but easy to arrange.
_____5. Unscheduled but hard to arrange due to time pressures either on me or on the EIP staff.
_____6. Unscheduled, because there was no EIP team in the school.
_____7. Unscheduled for other reasons.

Guidance Counselor Questionnaire (cont.)

17. In your experience this year (1963-64), conferences with the Principal or assistant have been (check one):

_____1. Scheduled appointments supplemented by unscheduled ones.
_____2. Usually scheduled.
_____3. Usually unscheduled, but with a few scheduled ones.
_____4. Unscheduled, but easy to arrange.
_____5. Unscheduled and hard to arrange due to time pressures either on me or on the EIP staff.
_____6. Unscheduled and hard to arrange for other reasons.

18. In previous years, conferences with the Principal or Assistant have been (check one):

_____1. Scheduled appointments supplemented by unscheduled ones.
_____2. Usually scheduled.
_____3. Usually unscheduled, but with a few scheduled ones.
_____4. Unscheduled, but easy to arrange.
_____5. Unscheduled but hard to arrange due to time pressures either on me or on the EIP staff.
_____6. Unscheduled, because there was no EIP team in the school.
_____7. Unscheduled for other reasons.

19. Parental cooperation is essential to the success of a program like the EIP program. In your school parents (check one):

_____1. Generally keep appointments and are helpful.
_____2. Generally don't keep appointments.
_____3. Generally keep appointments but do not cooperate.
_____4. Generally don't keep appointments but do cooperate.
_____5. Most do not keep appointments, but those who do, cooperate.

20. You have found communication with BCG social worker (check one):

_____1. Close and mutual.
_____2. Adequate.
_____3. Inadequate.
A. Explain. (Optional)

____

20b. Was the pattern the same in previous years?_______________
Explain (optional)_______________________________________

21. You have found communication with the BCG psychologist (check one):

_____1. Close and mutual.
_____2. Adequate.
_____3. Inadequate.
A. Explain: (optional)

____

B. Was the pattern the same in previous years?

____

Guidance Counselor Questionnaire (cont.)

22. Describe communication with the BCG psychiatrist:

23. In some schools the EIP team have been introduced to the faculty individually or in groups. In your school (check one):

____1. you have been introduced with an accurate description of your respective functions.
____2. you have been introduced with an inaccurate description of your functions.
____3. you have been introduced without a description of your functions.
____4. you have never been formally introduced.

24. Do you think the teachers in your school tend on the whole to regard you as: (check only one):

____1. a member of the school administration.
____2. a member of your discipline.
____3. a member of the psychiatric team.
____4. another teacher.
____5. other (explain):

Section III

Directions for rating:

Section III consiste of 16 items; items 26-41. Rate each item as to EIP effectiveness this school year in terms of the five point code (1-5) given below by putting the number of your estimate of effectiveness on the line in the left margin in front of the item. Do not omit any item.

CODE

____1. very helpful .
____2. helpful.
____3. not helpful.
____4. detrimental.
____5. not functioning as far as I am concerned.

25. How valuable was EIP program in increasing teacher willingness to maintain a difficult child in her class?
Comments: (optional)

____26. How valuable was the EIP program in the identification of children" with special abilities and talents?
____27. How valuable was the EIP program in the identification of children with incipient emotional problems?
____28. How valuable was the EIP program in the identification of children with physical problems?
____29. How valuable has been the EIP program in influencing the mental hygiene educational climate in the school?

Guidance Counselor Questionnaire (cont.)

____30. How valuable has been the EIP program in developing the special abilities and talents of identified pupils?
____31. What has been the effect of the EIP program on teacher attitudes toward disturbed children?
____32. What has been the effect of the EIP program on teacher attitudes toward children with learning problems?
____33. What has been the effect of the EIP program on the ability of teachers to spot early signs of behavioral difficulties?
____34. What has been the effect of the EIP program on the ability of teachers to meet pupils' needs?
____35. What has been the effect of the EIP program on the ability of teachers to identify children with special abilities and talents?
____36. What has been the effect of the EIP program on parental attitudes toward the school and its objectives?
____37. What has been the effect of the EIP program on parental attitudes toward the emotional problems of their children?
____38. What has been the effect of the EIP program on parental attitudes toward learning problems of their children?
____39. What has been the effect of the EIP program on the personal-social adjustment of the other pupils in the class?
____40. What has been the effect of the EIP program on the personal-social adjustment of the other pupils in the class?
____41. Of what assistance has the EIP program been in grouping pupils for classroom organization?

Section IV

Directions for rating:

Section IV consists of 5 items; items 42-46. Rate each item as to the usefulness of your contacts with the EIP team this school year in terms of the five point code 1-5 given below by putting the number of the rating most nearly approaching your feeling on the line in the left hand margin in front of the item. Do not omit any item.

CODE

____1. very helpful
____2. helpful
____3. not helpful
____4. annoying
____5. I have never had any contact.

____42. How useful have you found EIP grade conferences?
____43. How useful have you found EIP conferences with the psychiatrist?
____44. How useful have you found EIP conferences with the psychologist?
____45. How useful have you found EIP conferences with the social worker?
____46. How useful have you found EIP conferences with the whole clinic team at once?

Guidance Counselor Questionnaire (cont.)

47. If your experience in previous years has been different, please describe:______________________________

48. Other comments: (optional)______________________________

____

49. What percentage of your time do you spend in:

_________Interviewing parents
_________Interviewing children diagnostically
_________Interviewing children therapeutically
_________Observing children
_________Conferences with BCG personnel
_________Conferences with teachers, nurse, etc.
_________Conferences with principal
_________Studying records
_________Contacting other agencies
_________Preparing records and/or reports
_________Other

Total Per Cent : Describe:______________________________
100% ______________________________

50. What additional suggestions have you for improving the EIP program?

____

____

51. All things considered, EIP should be: (check one)

_____1. continued as it is
_____2. expanded
_____3. modified
_____4. discontinued

If you checked 3 or 4, what suggestions have you for modifying the EIP program that you did not mention in C above or what type of program or activity would you suggest in lieu of the EIP program?

Board of Education of the City of New York
Bureau of Educational Research

School Social Worker and School Psychologist Questionnaire On the Early Identification and Prevention Program

This instrument was developed on the basis of the objectives of the Early Identification and Prevention Program (EIP). Your observations of the program in your own school should be the point of reference. Please base your answers only on the 1963-64 school year. A self-addressed, stamped envelope has been enclosed for your convenience in mailing this directly to the evaluation committee. Since we want your opinion, please do not discuss your answers with anyone. If you are assigned to more than one EIP school and you receive this form in more than one school please fill out one for each school. Your anonymity will be protected.

Section I

DIRECTIONS: Please fill in all blanks.

1. Are you a social worker or psychologist?____________________
2. How many years have you been with BCG?____________________
3. How many years have you been assigned to this school?__________
4. Over the total school year of 1963-64, please state the percentage of your time allotted to:

   Grades Kg.-3__________
   Grades 4-6__________

5. How much of your work with grades 4-6 was follow-up work on children first seen in Kg.-3?____________________
6. Is there overlapping of functions among you and the rest of the EIP team? (nb. the team for the purposes of this statement is considered to consist of the social worker, the psychologist and the guidance counselor.)____________________
7. Describe the overlapping:____________________
   ____
8. What do you think causes it?
9. If you think the overlapping should be changed, how do you think a change could be effected?
10. Describe any problems of communication which exist in the functioning of EIP. Please be as specific as possible. If you can, please indicate the causes as you see them and any remedies you think would be effective.

Social Worker-Psychologist Questionnaire
(cont.)

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11. Please give approximate percentage of time you spend in each of the following activities:
    Intake____________________
    Screening____________________
    Conferences with guidance counselors____________
    Meetings or other conferences______________
    Time allotted to appointments with parents which are broken____________________
    Handling emergencies which turn out to be unworkable cases____________________
    Servicing workable cases________________
    Other____________________
    Describe:

12. If you think your time could be profitably redistributed, please describe:

13a. Do most of the children in your school come from families which are self-maintaining?
13b. Is it easy to involve the parents in your school in the treatment process?
14. Do you find that school personnel in your EIP school are well oriented to the EIP program? Please comment:
15. Are the school's expectations of the team realistic? Please comment:
16. Do you think this school has turned out to be an appropriate choice for an EIP program? Explain:
17. If the selection of a school for EIP were up to you, what criteria would you use?
18. Some EIP workers have pointed out the need for supplementary services in their schools such as remedial reading below the 3rd grade level, help to teachers with classroom management skills, smaller classes, teacher training. Is this - or another service a needed enhancement of the EIP program for the children in your school?

Section II

Section II consists of 21 items; items 19-39. Rate each item in terms of your effectiveness this year in achieving its realization. Use the six-point code (1-6) given below by putting the number of your estimate of your effectiveness on the line in front of the item. Do not omit any item.

Below each item there is space for your comment as to why this particular goal of EIP may not have been met. These comments are optional.

Social Worker-Psychologist Questionnaire

Code

1. Very effective
2. Effective
3. Not effective
4. Detrimental
5. I have not been able to function in this area
6. I do not know.

____19. How effective was the EIP program in the identification of children with special abilities and talents? Comment:

____20. How effective was the EIP program in the identification of children with incipient emotional problems? Comment:

____21. How effective has the EIP program been in the identification of children with physical problems? Comment:

____22. How effective has the EIP program been in influencing the mental hygiene educational climate in the school? Comment:

____23. How effective has the EIP program been in developing the special abilities and talents of identified pupils? Comment:

____24. How effective has the EIP program been in modifying teacher attitudes toward disturbed children? Comment:

____25. How effective has the EIP program been in modifying teacher attitudes toward children with learning problems? Comment:

____26. How effective has the EIP program been in the ability of teachers to spot early signs of behavioral difficulties? Comment:

____27. How effective has the EIP program been in increasing the ability of teachers to meet pupils' needs? Comment:

____28. How effective has the EIP program been in increasing the ability of teachers to identify children with special abilities and talents? Comment:

____29. How effective has the EIP program been in improving parental attitudes toward the school and its objectives? Comment:

____30. How effective has the EIP program been in improving on parental attitudes toward the emotional problems of their children? Comment:

____31. How effective has the EIP program been in improving parental attitudes toward learning problems of their children? Comment:

____32. How effective has the EIP program been in improving the personal-social adjustment of pupils with emotional problems? COmment:

____33. How effective has the EIP program been in improving the personal-social adjustment of the other pupils in the class? Comment: